

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

16 SEP 22 AM 8:32

TALLAHASSEE, FLORIDA

CR2E081 (11/10)

**CORPORATION
REINSTATEMENT**
2005-2016

 **FLORIDA DEPARTMENT OF STATE**
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F04000003732

1. Corporation Name

Brunswick Winair Co.

2. Principal Office Address - No P.O. Box #
c/o WGS - Compliance Services 3110 Kettering Blvd
Suite, Apt. #, etc.

3. Mailing Office Address
c/o WGS - Compliance Services 3110 Kettering Blvd
Suite, Apt. #, etc.

City & State

Moraine OH

Zip Country
45439-1924 USA

City & State

Moraine OH

Zip Country
45439-1924 USA

4. Date Incorporated or Qualified
To Do Business in Florida
07/01/2004

5. FEI Number
58-2456564

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays St
Suite, Apt. #, Etc.

City State Zip Code
Tallahassee FL 32301

700290586297

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent



REGISTERED AGENT MUST SIGN

Melissa Zender

Asst. Vice President

Date 09/22/2016

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres/Dir	Donald W. Hedick	5115 Habersham St	Brunswick GA 31520-2774
Secretary	Michael S. Kirkland	3110 Kettering Blvd	Moraine OH 45439-1924
Treasurer	Sean W. Culler	3110 Kettering Blvd	Moraine OH 45439-1924
Director	Dennis M Larkin	3110 Kettering Blvd	Moraine OH 45439-1924
Director	Monte L. Salsman	3110 Kettering Blvd	Moraine OH 45439-1924
Director	Philip E. Muegel	3110 Kettering Blvd	Moraine OH 45439-1924

10. E-mail Address:

(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:



SEAN W. CULLER TREASURER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/21/2016

937.294.5331

Date

Daytime Phone #

K. ASHTON

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 303858 3776A

AUTHORIZATION

COST LIMIT \$ 2,400.00

ORDER DATE : September 22, 2016

ORDER TIME : 12:53 PM

ORDER NO. : 303858-005

CUSTOMER NO: 3776A

REINSTATEMENT

NAME: BRUNSWICK WINAIR CO.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender

EXAMINER'S INITIALS _____

RECEIVED
DEPT. OF CORP.
16 SEP 22 PM 4:30

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