

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

DOCUMENT # P02000034325

03 OCT 13 AM 11:09

1. Corporation Name

DENIS G. MOYNIHAN, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

15 CYPRESS DRIVE
PALM HARBOR FL 34684

15 CYPRESS DRIVE
PALM HARBOR FL 34684



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT

03

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

03/29/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

04-3630391

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PSTD	MOYNIHAN, DENIS G	15 CYPRESS DRIVE	PALM HARBOR FL 34684

500023752075
10/13/03--01070--025 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Denis Moynihan

REGISTERED AGENT MUST SIGN

Date

Oct 9 '03

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., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Denis Moynihan

DENIS MOYNIHAN Oct 9 '03

727-424-5671

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E040 (7/03)

2092

To Whom it Concerns,

I did not receive the
prior UBR notices, Could
you please reinstate
my application, Enclosed
is a check for \$150.00.

Kind Regards

Denis Moynihan President