## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORMED

APPLICATION
FÒR
<b>REINSTATEMEN</b>



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #** 

388271

1. Corporation Name

HANDI-SERVI NO. 3, INC.

Malling Address



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

238 PALM LEAF AVENUE 238 PALM L LAKE WALES FL 33853 LAKE WALE				EAF AVENUE S FL 33853						
If above addresses are incorrect in any way, line through incorrect information and enter correction below.  2. New Principal Office Address, If Applicable  3. New Mailing Office Address, If Applicable							4. Dote lessen	proted or Ovalified		
							Date Incorporated or Qualified     To Do Business in Florida     09/13/1971			
Suite, Apt. #, etc. Suite, Apt. #,				, etc.			5. FEI Number		Applied For	
City & State City &			City & State	tate				59-1369876	Not Applicable	
Zip Country		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)	Title(s) Name of Officers and/or Directors			Street Address of Each Officer and/or Director 3 {Do NOT Use Post Office Box }			City / State / Zlp			
PD	BUSH, GEORGE W.			238 PALM LEAF AVE.			LAKE WALES FL			
SD	BUSH, WANDA E.			238 PALM LEAF AVE.				LAKE WALES FL		
					_			0000246 -03/19/98 ****300.		
							STATEMENT 97-98			
						·			a. alaw Jas	
8. Name and Address of Current Registered Agent Name						9. Name and Address of New Registered Agent				
BUSH, GEORGE W. 238 PALM LEAF AVE.						Street Address (P.O. Box Number is Not Acceptable)				
LAKE WALES FL 33853					Suite, Apt. #, Etc.					
					ŀ	City	····		State Zip Code	
Signature of Rigistered Agent — Date 3/10/9 8  REGISTERED AGENT MUST SIGN										
1t. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes V No (See other side for information on intangible tax.)										
this rein	istatement app y the corporat	officer or director or the rece plication, the reason for diss ion have been paid and the true and accurate, and my si	olution has been names of individ	eliminated, uals listed o	the corpora on this form	ate name satisfies do not qualify for	the requirements an exemption und	of section 607.0401 or 6		

GEORGE W. BUSH 3/10/98
GOFFICER ON DIRECTOR

Daytime Phone #