

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 AUG 13 AM 8:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0408

REINSTATEMENT

CR2E081 (12/07)

DOCUMENT # 503135
1. Corporation Name THE VILLAGE GREENERY INC.

2. Principal Office Address - No P.O. Box # 3. Mailing Office Address

280 PALM COAST PARKWAY NE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PALM COAST, FL

City & State

Zip

32137

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5/13/1976

5. FEI Number

59-1686124

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

GEORGE ROBERT PARKER III

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

47 FOREST HILL DRIVE

Suite, Apt. #, Etc.

City

PALM COAST

State

FL

Zip Code

32137

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

George Robert Parker III

REGISTERED AGENT MUST SIGN

Date AUG 12, 2008

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
PTD	GEORGE ROBERT PARKER III	47 FOREST HILL DRIVE	PALM COAST, FL, 32137
VSD	TONG, KYU PARKER	47 FOREST HILL DRIVE	PALM COAST, FL, 32137

10. 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 contained in Chapter 119, 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:

George Robert Parker III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE ROBERT PARKER

Date

AUG 12, 2008

Daytime Phone #

386-445-1336