

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

DIVISION OF CORPORATIONS

FILED

98 DEC 14 AM 11:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 517902

1. Corporation Name

ARIES CONSTRUCTION OF MID-FLORIDA, INC.

Principal Place of Business

766 DELTONA BLVD., STE D  
P O BOX 5038  
DELTONA FL 32728-2038

Mailing Address

766 DELTONA BLVD., STE D  
P O BOX 5038  
DELTONA FL 32728-2038

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.  
1779 Baldock Court  
City & State  
Deltona, Florida

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.  
1779 Baldock Court  
City & State  
Deltona, Florida

4. Date Incorporated or Qualified  
To Do Business in Florida

11/04/1976

5. FEI Number

59-1702107

Applied For

Not Applicable

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	ALEXANDER, WILLARD C. JR	766 DELTONA BLVD., STE D	DELTONA, FL 32725

REINSTATEMENT

300002719423--9  
-12/22/98--01076--025  
\*\*\*\*750.00 \*\*\*\*750.00  
300002719423--9  
-12/22/98--01076--026  
\*\*\*\*\*8.75 \*\*\*\*\*8.75

8. Name and Address of Current Registered Agent

ALEXANDER, WILLARD CLAY JR.  
766 DELTONA BLVD., SUITE D  
DELTONA FL 32725

9. Name and Address of New Registered Agent

Name  
Todd F. Alexander  
Street Address (P.O. Box Number is Not Acceptable)  
1779 Baldock Court  
Suite, Apt. #, Etc.

City  
Deltona

State  
FL

Zip Code  
32738

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.

Signature of  
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 12-9-98

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information  
on intangible tax.)

12. 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Co-Personal Representative of the Estate of Willard Clay Alexander, Jr.

12-9-98

(904) 532-5232

Date Daytime Phone #

IN THE CIRCUIT COURT IN AND FOR  
VOLUSIA COUNTY, FLORIDA

PROBATE DIVISION

CASE NO.: 01-12477 PRDL

IN RE: THE ESTATE OF:

01

WILLARD CLAY ALEXANDER,

Deceased.

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LETTERS OF ADMINISTRATION

TO ALL WHOM IT MAY CONCERN

WHEREAS, WILLARD CLAY ALEXANDER, a resident of Volusia County, Florida died on May 21, 1997, owning assets in the State of Florida, and

WHEREAS, TODD FRAZIER ALEXANDER and WILLARD C. ALEXANDER, SR. have been appointed personal representatives of the estate of the decedent and have performed all acts prerequisite to issuance of Letters of Administration in the estate,

NOW, THEREFORE, I, the undersigned circuit judge, declare TODD FRAZIER ALEXANDER and WILLARD C. ALEXANDER, SR. to be duly qualified under the laws of the State of Florida to act as personal representative of the estate of WILLARD CLAY ALEXANDER, deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

WITNESS my hand and the seal of this court this 16 day of July, 1997.

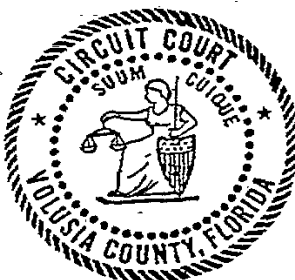
FILED IN THE OFFICE  
OF THE CLERK OF THE  
CIRCUIT COURT  
VOLUSIA COUNTY  
FLORIDA

JUL 18 1997

CLERK OF CIRCUIT & COUNTY  
COURT VOLUSIA COUNTY, FLORIDA

CIRCUIT JUDGE

JOHN V. DOYLE  
CIRCUIT JUDGE



STATE OF FLORIDA, VOLUSIA COUNTY  
I, HEREBY CERTIFY that the foregoing is a true  
copy of the original filed in this office and that said  
appointment still remains in full force and effect.  
This 18 day of July, A.D. 1997.

DIANE M. MATOUSEK  
Clerk of Circuit and County Court

By: R. G. Butler  
Deputy Clerk

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