

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 587013

1. Corporation Name

ACCENT GLASS CO., INC.

Principal Place of Business

1335 BENNETT RD  
SUITE 141  
LONGWOOD FL 32750

Mailing Address

1335 BENNETT RD  
SUITE 141  
LONGWOOD FL 32750

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.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

09/15/1978

5. FEI Number

59-1846378

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PD	<del>HUGHSON, ALBERT A.</del> KEVIN SIMMERMAN I	<del>90 HUNTERS TRAIL</del> 2705 AMSDEN RD	<del>LONGWOOD FL</del> WINTER PARK, FL.
VTD	<del>KUCHARSKI, MARY</del> TEI SIMMERMAN	<del>90 HUNTERS TRAIL</del> 2705 AMSDEN RD	<del>LONGWOOD FL</del> WINTER PARK, FL
S	SIMMERMAN, TEI A.	2705 AMSDEN RD	WINTER PARK FL
VM	<del>SIMMERMAN, KEVIN A.</del> ALBERT KUCHARSKI	<del>2705 AMSDEN RD</del> 90 HUNTERS TRAIL	WINTER PARK FL LONGWOOD, FL
			300002375453--1 -12/17/97--01093--025 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

SIMMERMAN, TEI A  
2705 AMSDEN ROAD  
WINTER PARK FL 32792

9. Name and Address of New Registered Agent

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.

Signature of  
Registered Agent

*Tei A. Simmerman*

REGISTERED AGENT MUST SIGN

Date 12/10/97

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:

*Tei A. Simmerman*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Tei A. Simmerman

12/10/97

Date

407-831-6001

Daytime Phone #

CR2040 (8/97)