

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

-FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 NOV 30 PM 4:45

DOCUMENT # **592529**

1. Corporation Name
Ted McTeer Harvesting, Inc.

Principal Place of Business
**6121 Miss Mary Ann Road
Haines City, FL 33844**

Mailing Address
**P.O. Box 1206
Haines City, FL 33845-1206**

REINSTATEMENT

79-99

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida November 13, 1978	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-1815017	
City & State		City & State		Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$6.75 Additional Fee is added 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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P/D	Carol J. McTeer	6121 Miss Mary Ann Road	Haines City, FL 33844
VP	Ted M. McTeer	5910 Kalogrides Road	Haines City, FL 33844
			300003070583--1
			-12/15/99--01018--012
			*****8.75 *****8.75
			300003070583--1
			-12/15/99--01018--013
			***2596.25 ***2596.25

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
Ted McTeer 6121 Miss Mary Ann Road Haines City, FL 33844	Name Carol J. McTeer Street Address (P.O. Box Number is Not Acceptable) 6121 Miss Mary Ann Road Suite, Apt. #, Etc. City Haines City State FL Zip Code 33844

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 *Carol J. McTeer* Date **11-22-99**

REGISTERED AGENT MUST SIGN

11. This corporation owes 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: *Carol J. McTeer* 11-22-99 (863) 422-3528 AD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Carol J. McTeer, President

Date Daytime Phone #