

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 # 613932

1. Corporation Name

JORI, INC.

Principal Place of Business

~~6616 12ST W~~ #
BRADENTON FL 34207 #
US

Mailing Address

~~6616 12ST W~~ #
BRADENTON FL 34207 #
US

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.
5655 4th Ave N.
City & State
St. Petersburg, FL
Zip
33710-7923 Country
US

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.
5655 4th Ave N.
City & State
St. Petersburg, FL
Zip
33710-7923 Country
US

4. Date Incorporated or Qualified To Do Business in Florida

03/22/1979

5. FEI Number

59-1901221

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
P	HOUSE, JOHN F	6616 12ST W	BRADENTON FL #
VST	HARDESTY, DUANE A	4002 CANTOR CT	VALRICO FL #
V	HARDESTY, DUANE A	4011 LEVONSHIRE PLACE	VALRICO, FL 33594
ST	HOUSE, BELVA S	5655 4th Ave N.	St. Petersburg, FL
P	HOUSE, JOHN F.	5655 4th Ave N.	St. Petersburg, FL 33710-7923
			100002732041-4 -01/05/99-01060-013 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

HOUSE, JOHN F
6616 12ST W #
BRADENTON FL 34207 #

9. Name and Address of New Registered Agent

Name
House, John F
Street Address (P.O. Box Number is Not Acceptable)
5655 4th Ave N.
Suite, Apt. #, Etc.
City
St. Petersburg State
FL Zip Code
33710-7923

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

John F. House **NOTRE REQUIRED**
John F. House REGISTERED AGENT MUST SIGN

Date 12/23/98

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)(f), 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

Duane A. Hardesty **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Duane A. Hardesty

12/23/98

Date

(813) 302-7541

Daytime Phone #

CR2E040 (9/98)