

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 # 647921

1. Corporation Name

KENROSE, INC.

Principal Place of Business

421 GULFVIEW BLVD. SOUTH  
CLEARWATER BEACH FL 34630

Mailing Address

421 GULFVIEW BLVD. SOUTH  
CLEARWATER BEACH FL 34630

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date of Reinstatement  
To Do Business in Florida

12/11/1979

5. FEI Number

59-1974162

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)<br>1 | Name of Officers<br>and/or Directors<br>2 | Street Address of Each<br>Officer and/or Director<br>(Do NOT Use Post Office Box Numbers)<br>3 | City / State / Zip<br>4 |
|---------------|---|--|-------------------------|
| T             | ROSENOW, KENNETH G                        | 715 CEDAR ST   | MANISTEE, MICH 00000    |
| D             | ROSENOW, KENNETH G, JR                    | 451 W FREESOIL ROAD  | FREESOIL, MICH 00000    |
| P             | ROSENOW, LOIS M                           | 715 CEDAR ST   | MANISTEE, MICH 00000    |
| S             | KIMM, KRISTEN M                           | 715 CEDAR ST   | MANISTEE, MICH 00000    |
| V             | ROSENOW, MICHAEL C                        | 715 CEDAR ST   | MANISTEE, MICH 00000    |
|               |   |  |                         |

8. Name and Address of Current Registered Agent

ROSENOW, KENNETH G.  
421 GULFVIEW BLVD. SOUTH  
CLEARWATER BEACH FL 34630

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

000002905730-4

-06/15/99-01103-007

\*\*\*308-75 2000-308.75

FL

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

*Kenneth G. Rosenow*  
REGISTERED AGENT MUST SIGN

Date

5/29/99

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:

*Kenneth G. Rosenow*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/29/99 727-447-3444  
D. John Pharrick

CR2E040 (9/98)