


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **690666**

1. Corporation Name

**FLORIDA GARDENS INVESTMENTS, INC.**

Principal Place of Business

7334 LAKE WORTH RD.  
LAKE WORTH FL 33467

Mailing Address

7344 LAKE WORTH RD  
LAKE WORTH FL 33467

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 Incorporated or Qualified  
To Do Business in Florida

**06/17/1981**

5. FEI Number

**59-2166884**

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	4 City / State / Zip
ST	BEACHLER, G J	7334 LAKE WORTH RD	LAKE WORTH FL 33467
P	FARNBAUCH, W J	7334 LAKE WORTH RD.	LAKE WORTH FL 33467

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BEACHLER, G.J.  
7334 LAKE WORTH RD  
LAKE WORTH FL 33467

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

REGISTERED AGENT MUST SIGN

Date

11. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 DEC -3 PM 12:27

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-12/12/01--01078--014

\*\*\*\*150.00 \*\*\*\*150.00



CR2E040 (8/01)

## Florida Gardens Investments, Inc.

7334 Lake Worth Road  
Lake Worth, Florida 33467  
561-965-2000

November 27, 2001

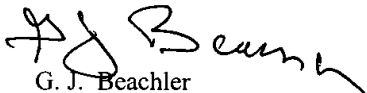
Division of Corporations  
Annual report/reinstatement section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

Re: Florida Gardens Investments, Inc  
Document #690666

Dear Sir/Madame:

We received a notice of dissolution for the above corporation. After speaking with Andy Dunlap on November 26, he informed me that this was issued due to a return of the original report from the post office as undeliverable. He told me to complete the form and submit it with the normal fee and the penalty fee would be waived because of this. We have enclosed \$150 to cover the filing fees.

Sincerely,

  
G. J. Beachler  
President