

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 DEC 17 AM 11:37

DOCUMENT # 717683

1. Corporation Name

Tiny Tots Day Nursery Of  
LAKELAND, FLORIDA, INC.

600139095146  
12/17/08--01025--004 \*\*315.00

REINSTATEMENT 07-08<sup>KS</sup>

2. Principal Office Address - No P.O. Box #

1715 M.L.K. Jr. Ave

Suite, Apt. #, etc.

3. Mailing Office Address

1715 M.L.K. Jr. Ave

Suite, Apt. #, etc.

City & State

Lakeland, FL

Zip

33805

Country

Polk

City & State

Lakeland, FL

Zip

33805

Country

Polk

4. Date Incorporated or Qualified  
To Do Business in Florida

1969

5. FEI Number

59-108 3127

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Janice Fisher

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

1444 Morganwood Dr.

Suite, Apt. #, Etc.

City

Lakeland

State

FL

Zip Code

33801

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

Janice Fisher

REGISTERED AGENT MUST SIGN

Date 11/24/08

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	John Ruffin	1715 M.L.K. Jr. Ave	LKld, FL 33805
V-P	Dorothy Moore	1715 M.L.K. Jr. Ave	LKld, FL 33805
S	Albertha Tabron	1715 M.L.K. Jr. Ave	LKld, FL 33805
T	Mildred Hawk	1715 M.L.K. Jr. Ave	LKld, FL 33805
D	Annie Phyll	1715 M.L.K. Jr. Ave	LKld, FL 33805
D	Janice Fisher	1444 Morganwood Dr.	LKld FL 33805

10. 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 contained in Chapter 119, 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: Janice Fisher  
Janice Fisher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/24/08 688-3096  
Date Daytime Phone #