

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 NOV 17 PM 3:00

DOCUMENT # 747361

1. Corporation Name

CLOVER LEAF FARMS CLUB, INC.

Principal Place of Business

Mailing Address

CLOVER LEAF FARMS  
3090 WESTLAND RD  
BROOKSVILLE FL 34601  
US

CLOVER LEAF FARMS  
3090 WESTLAND RD  
BROOKSVILLE FL 34601  
US

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

~~CLOVER LEAF FARMS CLUB~~

~~CLOVER LEAF FARMS CLUB~~

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4258 TIPPERARY LN

4258 TIPPERARY LN

City & State

City & State

BROOKSVILLE FL

BROOKSVILLE FL

Zip

Country

Zip

Country

34601 USA

34601 USA

REINSTATEMENT



400024763784

4. Date Incorporated or Qualified To Do Business in Florida

05/24/1979

5. FEI Number

APPLIED FOR

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
P	GLODEN, THOMAS	4602 DAWNGATE LANE	BROOKSVILLE FL 34601
V	DELANEY, HUGH	5335 HARRINGTON ST	BROOKSVILLE FL 34601
S	PALMER, EVALINA	18 CLOVERLEAF CIRCLE	BROOKSVILLE FL 34601
T	<del>LITTELL LYDIA W</del> LLOYD SCHMIDT	<del>3090 WESTLAND RD</del> 4258 TIPPERARY LN	BROOKSVILLE FL 34601
D	<del>HOLDRIDGE MURIEL</del> JOYCE HEWITT	<del>6405 ELLIS COURT</del> 5341 CORK ST	BROOKSVILLE FL 34601
D	SCHMIDT, LLOYD	4258 TIPPERARY LANE	BROOKSVILLE FL 34601

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LITTELL LYDIA W  
3090 WESTLAND ROAD  
BROOKSVILLE FL 34601

Name

LLOYD SCHMIDT

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

4258 TIPPERARY LN

Suite, Apt. #, Etc.

City

BROOKSVILLE

State

Zip Code

FL

34601

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. or 617.0505, F.S.

Signature of Registered Agent

Lloyd Schmidt

REGISTERED AGENT MUST SIGN

Date Nov. 13, 2003

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:

Thomas J. Gloden

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/13/03 352-799-4065

Date

Daytime Phone #

CR2E040 (7/03)

2/2

State of Florida  
Department of State

The Cloverleaf Farms Club.  
did not receive the Uniform  
Business Forms for 2003.  
the Registered agent moved  
and the forms were not Forwarded.

Thomas Gloden President  
Thomas Gloden