

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

03 OCT 17 AM 9:53

DOCUMENT # F01000004247

1. Corporation Name

THE HERITAGE GROUP VISION 21, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT 03

Principal Place of Business

Mailing Address

~~757 JONES CREEK DR.~~

757 JONES CREEK DR.

~~EVANS GA 30809~~

EVANS GA 30809

171 JACKSON RD

ATLANTIC BEACH, FL 32233



000023910430

10/17/03--01072--012 \*\*150.00

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

2. New Principal Office Address, If Applicable

171 JACKSON RD

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ATLANTIC BEACH FL

City & State

Zip

32233

Country

USA

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

08/08/2001

5. FEI Number

58-2376158

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PC	DORBU, VICTOR L	757 JONES CREEK DRIVE	EVANS GA 30809
TD	DORBU, SIDONESE P	757 JONES CREEK DRIVE	EVANS GA 30809
S	DORBU, MITZI A	<del>451 MONUMENT RD. UNIT 417</del> 171 JACKSON RD	<del>JACKSONVILLE FL 32225</del> ATLANTIC BEACH, FL 32233
<del>VC</del>	<del>LYLES, TOMMY</del>	<del>13025 HUNTERWOOD ROAD</del>	<del>JACKSONVILLE FL 32225</del>

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10/17/03--01072--013 \*\*8.75

8. Name and Address of Current Registered Agent

LYLES, TOMMY  
60 ARDELLA ROAD  
ATLANTIC BEACH FL 32233

9. Name and Address of New Registered Agent

Name

VICTOR DORBU

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

171 JACKSON ROAD

Suite, Apt. #, Etc.

City

ATLANTIC BEACH

State

FL

Zip Code

32233

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

SIGNATURE *[Signature]*

REGISTERED AGENT MUST SIGN

Date

10/10/2003

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:

*[Signature]* SIDONESE DORBU

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/11/2003

Date

Daytime Phone #

706 860 6862

CR2E040 (7/03)

THE HERITAGE GROUP VISION 21 INC  
757 JONES CREEK DRIVE  
EVANS, GA. 30809

OCTOBER 11, 2003

FLORIDA DEPT. OF STATE  
DIVISION OF CORPORATIONS  
P.O. Box 6327  
TALLAHASSEE, FL 32314

DEAR MADAM,

PLEASE BE ADVISED THAT THIS CORPORATION DID NOT  
RECEIVE THE TWO PRIOR UNIFORM BUSINESS REPORT (UBR) NOTICES. IN  
FACT THIS IS THE ONLY NOTICE THAT HAS BEEN RECEIVED. WE  
ENCLOSE THE COMPLETED APPLICATION FOR REINSTATEMENT AND THE  
UBR FILING FEE OF \$ 150.00.

Sincerely.

*Sidonie Darbu*

SIDONIE DARBUE.

TREASURER / DIRECTOR.