

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 NOV 17 PM 5:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F45810

1. Corporation Name

Larry J. Frost, Inc.

200043299992  
12/09/04--01026--002 \*\*2733.25

2. Principal Office Address

5006 Trouble Creek Road

Suite, Apt. #, etc.

111

City & State

New Port Richey, Florida

Zip

34652

Country

Pasco

3. Mailing Office Address

5006 Trouble Creek Road

Suite, Apt. #, etc.

111

City & State

New Port Richey, Florida

Zip

34652

Country

Pasco

REINSTATEMENT 89.04

4. Date Incorporated or Qualified  
To Do Business in Florida

7-01-81

5. FEI Number

592126647

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee req  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Larry J. Frost

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

5006 Trouble Creek Road

Suite, Apt. #, Etc.

111

City

New Port Richey

State

FL

Zip Code

34652

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

Larry J. Frost

Date

11-16-04

REGISTERED AGENT MUST SIGN

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
Pres.	LARRY J. FROST	1449 STARLIGHT COVE	TARPON SPRINGS FL. 34689
Vice-Pres	JAMES FRONTERA	1805 CHINA BERRY LANE	OLDSMAR, FL. 34677
Secretary	Wendi BAUMGARTNER	1834 RALLY LANE	HOLIDAY, FL. 34690

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 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:

Larry J. Frost

LARRY J. FROST

Nov 16 2004 727-849-2866

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #