

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 DEC 22 PM 3:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F82597

1. Corporation Name

FINZER ROLLER OF FLORIDA, INC.

Principal Place of Business

2580 OLD COMBEE ROAD
LAKELAND FL 33805

Mailing Address

2580 OLD COMBEE ROAD
LAKELAND FL 33805



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

129 Rawls Road

Suite, Apt. #, etc.

City & State

Des Plaines, Illinois

Zip

60018-1329

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/01/1982

5. FEI Number

59-2192223

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
POK	FINZER, JOHNNY, JR.	3920 W. ARMITAGE AVE	CHICAGO IL
STD	FINZER, ELIZABETH M.	3920 W. ARMITAGE AVE	CHICAGO IL
W	SULLIVAN, ROBERT E.	3920 W. ARMITAGE AVENUE	CHICAGO IL
See Attachment for list of Officers and Directors			400002721134--7 -12/23/98--01064--025 *****8.75 *****8.75
			REINSTATEMENT 98
			12-22-98

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

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

100002721131--6

Suite, Apt. #, Etc.

-12/23/98--01064--024

City

*****750.00

State

Zip Code

FL

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 12/18/98

James M. Halpin, Asst. Secretary

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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

FINZER 12-17-98

Date

Daytime Phone #

847-390-6200

(12)

ATTACHMENT TO
1998 FLORIDA ANNUAL REPORT
FOR
FINZER ROLLER OF FLORIDA, INC.

<u>Title</u>	<u>Name</u>	<u>Street Address</u>	<u>City/State/Zip</u>
P/D	Thomas E. Ryan III	129 Rawls Road	Des Plaines, IL 60018-1328
VP/D	John O. Finzer III	129 Rawls Road	Des Plaines, IL 60018-1328
S/D	Christine E. Finzer	129 Rawls Road	Des Plaines, IL 60018-1328
D	John O. Finzer, Jr.	129 Rawls Road	Des Plaines, IL 60018-1328
D	David M. Finzer	129 Rawls Road	Des Plaines, IL 60018-1328
D	Martin B. Finzer	129 Rawls Road	Des Plaines, IL 60018-1328
D	Susan Finzer Sullivan	129 Rawls Road	Des Plaines, IL 60018-1328