

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F94600003299

1. Corporation Name

VOLUNTEER FLOOR CO., INC.

Principal Place of Business Mailing Address

1712 Sterchi Street
Knoxville, TN 37921

P.O. Box 4192
Knoxville, TN 37921

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

State, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida
06-23-94

5. FEI Number

62-0725407

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 |
|----------|--------------------------------------|---|---------------------|
| PD | Collins, Louis M. | 1712 Sterchi St. | Knoxville, TN 37921 |
| VP | Curtis, Michael H. | 1712 Sterchi Street | Knoxville, TN 37921 |
| VD | Holdredge, Joe C. | 1712 Sterchi Street | Knoxville, TN 37921 |
| S | Jarnagin, Leisa L. | 1712 Sterchi Street | Knoxville, TN 37921 |

REINSTATEMENT 7-7-99

8. Name and Address of Current Registered Agent

Barron, Harry
10426 Mulligan Ct.
Tampa, FL 33647

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

REGISTERED AGENT MUST SIGN

Date 7-7-99

11. This corporation owes 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 re-instatement 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:

Leisa L. Jarnagin, Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Leisa L. Jarnagin, Secretary

T. LEWIS NOV 5 1999

9-3-99 423-521-7663
Date Daytime Phone #

CR2E001 (12/98)