

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE
		Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700000 3896

1. Corporation Name

A & T New Holland, INC.

Principal Place of Business

1243 Evercane Road
Clewiston, Fl.
33440

Mailing Address

P.O. Box 160
Clewiston, Fl.
33440

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

7/10/97

5. FEI Number

65-0766601

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres.	Jack Ames	1243 Evercane Road	Clewiston, Fl. 33440
V.P.	G. K. Neuenschwander	500 Diller Avenue	New Holland, PA 17557
Sec/ Treas	W. Williams	5401 Edgerton Drive	Norcross, GA 30092
Asst/ Sec.	Sheri Landis	500 Diller Avenue	New Holland, PA 17557

8. Name and Address of Current Registered Agent

CT Corporation System
c/o CT Corporation System
1200 South Pine Island Road
Plantation, Fl. 33324

9. Name and Address of New Registered Agent

Name
Jack Ames
Street Address (P.O. Box Number is Not Acceptable)
12863 Julip Court
Suite, Apt. #, Etc.
City
Ft. Myers,

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

Jack Ames, Pres.

REGISTERED AGENT MUST SIGN

Date

4/22/99

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 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: Jack Ames, Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/99

Date

941-902-0290

Daytime Phone #

FILED

99 JUN -3 AM 11:32

TALLAHASSEE, FLORIDA

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REINSTATEMENT 98-484 B

CR25081 (12/98)