

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

98 JAN 27 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F97332**

1. Corporation Name

Tintern Abbey, Inc.

Principal Place of Business

**1 Court Square
Lebanon, KY 40033**

Mailing Address

**1 Court Square
Lebanon, KY 40033**

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

2. New Principal Office Address, If Applicable

1 Court Square

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Lebanon, KY 40033

City & State

Zip

40033

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

1982

5. FEI Number

59-22-16660

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
P/T	Kern Alexander, Jr.	1510 Main Street	Murray, KY 42071
VP/S	Theodore H. Lavit	1 Court Square	Lebanon, KY 40033
			700002421767--4 -02/04/98--01110--003 ****900.00 ****900.00

REINSTATEMENT 97-98

A. Alan
Jan 27, 1998

8. Name and Address of Current Registered Agent

**Kern Alexander III
Law Offices
1005 Southwest Second Ave.
Gainesville, FL 32601**

9. Name and Address of New Registered Agent

Name

N. A.

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

S. Kern Alexander III
REGISTERED AGENT MUST SIGN

Date **1/26/98**

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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:

Kern Alexander, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Kern Alexander, Jr.

1/23/98
Date

(502) 753-8140
Daytime Phone #

CR2E040 (12-96)