

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F98000003428

1. Corporation Name

THFL, INCORPORATED

Principal Place of Business

9409 SHELBYVILLE RD  
LOUISVILLE KY 40223

Mailing Address

9409 SHELBYVILLE RD  
LOUISVILLE KY 40223

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

4. Date Incorporated or Qualified  
To Do Business in Florida

06/16/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

5. FEI Number

61-1292661

Applied For

Not Applicable

Zip

Country

Zip

Country

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	4 City / State / Zip
P	DOUGHERTY, DAN	9409 SHELBYVILLE RD	LOUISVILLE KY 40223
			300009771473 01/02/03--01004--018 **750.00
			300009771473 018 **750.00

8. Name and Address of Current Registered Agent

DOUGHERTY, DAN  
11035 PHILLIPS HIGHWAY  
JACKSONVILLE FL 32256

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. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11. 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel J. Dougherty 12/28/02

Date

Daytime Phone #

FILED

03 JAN 29 PH 3:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



1cel3

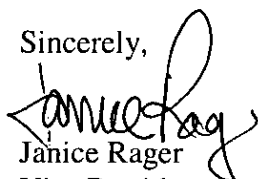
CR2E040 (8/02)

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As we discussed, please help me to get this resolved. I would like to ask that in light of the fact that we never received the original form, that you accept the \$300.00 filing for 2002-2003 UBR and request a refund in the amount of \$450.00, which we overpaid in an effort to expedite this process.

I appreciate any assistance you can provide in this matter. Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Janice Rager", written over the printed name.

Janice Rager  
Vice President  
THFL, Inc.

# Thomasville

HOME FURNISHINGS<sup>SM</sup>

9409 Shelbyville Road  
Louisville, Kentucky 40222  
502-426-0212 • Fax 502-429-6742  
www.thomasville.com

2cel3

January 28, 2003

Ms. Michele Milligan  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

RE: THFL, Inc.  
F98000003428

Dear Ms. Milligan;

I am writing this letter to seek your assistance regarding the Uniform Business Report filed for the above referenced company. I have already sent correspondence to the Division of Corporations regarding the fact that our records indicate that we have previously filed this form in June and made a payment of \$550.00 at that time.

The Division of Corporations subsequently sent us an Application for Reinstatement, It now appears that the \$550.00 payment was never received by your office. I placed a stop payment on the original check and reissued a payment in the amount of \$750.00 upon advice from someone in your office to get the payment in and write a letter asking for a refund of the overpayment.

It now appears that although we sent an Application for Reinstatement our application has not been processed and was returned to us. Pursuant to our conversation today, I am sending a back to you the correspondence which originally reached your department on December 31<sup>st</sup> and the forms that were attached to it. Please see by the letter dated December 27<sup>th</sup> that our company previously filed the UBR in June. Our company never received the first form and therefore missed the first filing date. When we received the notice indicating that we had not filed the by the initial date, we immediately cut a check on June 3rd, and filed before the September deadline. Please see the attached letter for further details.