

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State

DIVISION OF CORPORATIONS

W0800000SSS2

DOCUMENT # F99000002605

1. Corporation Name

K/G TALL TIMBERS, INC.

2. Principal Office Address - No P.O. Box #

3 Daniel Court

Suite, Apt. #, etc.

City & State

Randolph, NJ

Zip

07869

Country

US

3. Mailing Office Address

3 Daniel Court

Suite, Apt. #, etc.

City & State

Randolph, NJ

Zip

07869

Country

US

7. Name and Address of Current Registered Agent

Name

GARY M. BERKSON

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

111 NORTH ORANGE AVE

Suite, Apt. #, Etc.

Suite 1200

City

Orlando

State

FL

Zip Code

32807

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date

2/19/08

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Benjamin Geller	74 South Powder Mill Road	Morris Plains, NJ 07950
V.P.	Herbert C. Klein	155 Polifly Road	Hackensack, NJ 07601
Secy	MARTIN B. GELLER	3 Daniel Court	Randolph, NJ 07869

000119550850
03/05/08--01017--015 **150.00

10. 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 contained in Chapter 119, 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] MARTIN B. GELLER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

973-476-6292

FILED

2008 FEB 21 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

013/08 01235 014 \$450.00
REINSTATEMENT
CF2E681 (12/07)
05-08

4. Date Incorporated or Qualified
To Do Business in Florida

5/6/99

5. FEI Number

94-3416659

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.