

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **G00845**

1. Corporation Name

Judge Specialty Concrete, Inc.

FILED

09 JUL 14 AM 8:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REINSTATEMENT** 07-19

CR2E081 (12/08) *JC 7/20*

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

960 Harbor Lake Ct

Suite, Apt. #, etc.

Suite A

City & State

Safety Harbor, FL

Zip

34695

Country

USA

3. Mailing Office Address

PO Box 1127

Suite, Apt. #, etc.

City & State

Safety Harbor, FL

Zip

34695

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

09/16/1982

5. FEI Number  
59-2217144

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

Thomas Judge

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

960-A Harbor Lake Ct

Suite, Apt. #, Etc.

City

Safety Harbor

State

FL

Zip Code

34695

☐ 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.

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

Date July 9, 2009

REGISTERED AGENT MUST SIGN

**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
P	James Judge	960-A Harbor Lake Ct	Safety Harbor, FL 34695
VP/S/T	Thomas Judge	960-A Harbor Lake Ct	Safety Harbor, FL 34695

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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:

Thomas Judge

July 9, 2009

727-725-1666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #