

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H30549

1. Corporation Name

SAGAERT ORCHIDS, INC.

Principal Place of Business

5170 2ND RD
LAKE WORTH FL 33467

Mailing Address

235 MIRIMAR
WEST PALM BEACH FL 33405
US

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

11/20/1984

5. FEI Number

59-2472768

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
VPS	SAGAERT, DANIEL H	5170 2ND RD P.O. Box 1093	LAKE WORTH FL 33467 Ocklawaha, FL 32179
PD	SAGAERT, KATHLEEN ROBBINS	235 MIRIMAR	WEST PALM BEACH FL 33405

8. Name and Address of Current Registered Agent

ROBBINS
SAGAERT, KATHLEEN J
235 MIRIMAR
WEST PALM BEACH FL 33405

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
Kathleen Robbins
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/22/02

FILED

02 DEC 10 AM 10:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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12/30/02--01060--023 **75.00

Zee 3

SEARCY
DENNEY
SCAROLA
BARNHART
& SHIPLEY P.A.
*Attorneys
at Law*

November 22, 2002

Department of State
ATTN.: MICHELLE MILLIGAN
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314-6327

Re: Sagaert Orchids, Inc.

Dear Ms. Milligan:

This letter follows our conversation yesterday concerning the dissolution of Sagaert Orchids. You asked that I write a letter explaining the facts leading to this dissolution and to have our client countersign this letter. I have enclosed two checks totaling \$150.00, the charge you indicated to me was due in this matter.

In May, 2002, I forwarded the Department of State corporation forms to your offices with two checks enclosed, one from Dan Sagaert and another from our firm. Both checks were in the amount of \$275.00. Mr. Sagaert's check was returned to our offices because the Payee was incorrectly identified as the Department of Revenue AND because the check was for an incorrect amount. Mr. Sagaert's check was corrected and re-submitted to your offices on June 25, 2002.

Apparently, on July 1, 2002, your offices returned that check to 5170 2nd Road in Lake Worth, Florida. That address, as indicated on the forms produced by your offices, is the **former** principal place of business for Sagaert Orchids and not the mailing address for Sagaert Orchids. Neither Mr. Sagaert nor Mrs. Robbins (the two officers of the corporation) ever received those forms or their cancelled checks back. Late last month, the enclosed form was sent to Mrs. Robbins, indicating that the corporation had been dissolved.

After my conversation with you yesterday, you indicated that our clients should sign the forms sent to them by your offices, resubmit payment in the amount of \$150.00 and send a letter from our office explaining the circumstances



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surrounding the matter. You will find the requested documents and payment enclosed.

Thank you for your assistance in this matter. Should you have any questions, or should additional action be necessary, please feel free to contact me at 561-686-6300.

Sincerely,



LAURIE J. BRIGGS

Enclosures

cc: Ms. Kathleen Robbins
Mr. Dan Sagaert
David J. Sales, Esquire

I, Kathleen Robbins, hereby countersign this letter, indicating my agreement with the contents.



Kathleen Robbins, President
Sagaert Orchids, Inc.

11/22/02
Date

