

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 JAN 22 AM 8:59

DEPT. OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION

1998-2003

UBR



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # H51087

1. Corporation Name

R. L. LOYD CONTRACTOR, INC.

2. Principal Office Address

4305 Stirling Rd.

3. Mailing Office Address

4305 Stirling Rd.

Suite, Apt. #, etc.

#22

Suite, Apt. #, etc.

#22

City & State

Ft. Lauderdale Fl.

City & State

Ft. Lauderdale Fl.

Zip

33314

Country

USA

Zip

33314

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

04/08/85

5. FEI Number

592517209

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

1998-2003 UBR

7. Name and Address of Current Registered Agent

Name

Richard L. Loyd

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

4305 Stirling Rd.

Suite, Apt. #, Etc.

#22

City

Ft. Lauderdale

State

FL

Zip Code

33314

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

*Richard L. Loyd*  
REGISTERED AGENT MUST SIGN

Date JAN 22/03

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.	Richard L. Loyd	4305 Stirling Rd. #22	Ft. Lauderdale Fl. 33314
		01/17/03	01083 003 #908.75

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 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:

*Richard L. Loyd*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 22/03

Date

Daytime Phone #

8954 895 2012  
H 954 584-6696

CR2E081 (10/02)

ATTENTION Kathy Ashton  
FAX 850 245 6017

Richard Loyd

R. L. Contractors  
4305 Stirling Rd. #22  
Ft. Lauderdale Fl. 33314

Custom Remodeling  
H (954) 584 6696  
CB# CO45562  
C 954 895-2012

As per phone conversation, Jan 15 /03 I am sending attached form to reinstate my corporation. I had moved five years ago to my present address. In that time I never received any notices for renewal fees. Since I had shut the business down in 1998 due to a close death in the family. As per phone conversation, the fee was \$900.00 plus \$8.75 for Certificate of Status

*This is the original Letter*

Sincerely Richard Loyd

**Ship From:**

Richard Loyd

**Ship To:**

Company: Department of State  
Name:  
Division Of Corporations  
P.O. Box 6327  
TALLAHASSEE, FL 32314

**USPS Express Mail**

Trans Date	1/16/03 9:24:16 AM
Trk Nbr	EJ244252105US
Weight:	0 LB 0.6 OZ
Dims	0.00 x 0.00 x 0.00
Rating Wt	0 LB
Pkg Id	9843
Ins Amt	0.00

Shipping	18.85
Labor	0.00
Materials	0.00
Sales Tax	0.00
<b>TOTAL</b>	<b>\$18.85</b>