

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # J45768

1. Corporation Name

Taylor's Truck Center Inc

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

1485 NW Hwy 441

Suite, Apt. #, etc.

3. Mailing Office Address

PO Box 868

Suite, Apt. #, etc.

City & State

Alachua FL

Zip

32616

Country

USA

City & State

Alachua FL

Zip

32616

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

59-282 4548

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

Richard Taylor

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

8904 NW 190th Terr.

Suite, Apt. #, Etc.

City

Alachua

State

FL

Zip Code

32615

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

4-12-08

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.	Richard Taylor	8904 NW 190th Terr.	Alachua FL 32615
VP	Beverly Taylor	8904 NW 190th Terr.	Alachua FL 32615

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]* Richard Taylor

4-12-08

Date

352-226-2660

Daytime Phone #

FILED  
08 APR 16 PM 1:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

300124311663  
04/18/08--01008--027 \*\*458.75

REINSTATEMENT 06-08  
CR2E081 (12/07)