

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

①

APPLICATION FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

97 OCT 30 PM 1:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # J60423

1. Corporation Name

COMMUNICATION VENTURES, INC.

Principal Place of Business

601 SWEETWATER CLUB CIR

~~407 WINDVA SPRING RD #110~~ 380 GOLF BROOK CIR

LONGWOOD FL 32778

US

Mailing Address

PO BOX 9

15623

LONGWOOD FL 32778

US



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

380 GOLF BROOK CIR.

Suite, Apt. #, etc.

#110

City & State

LONGWOOD, FL.

Zip

32778

Country

US

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

03/02/1987

5. FEI Number

59-2781242

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	HERPE, ROBERT G.	601 SWEETWATER CLUB CIR. 380 GOLF BROOK CIR. #110	LONGWOOD FL
D	HERPE, ESTHER	601 SWEETWATER CLUB CIR. 380 GOLF BROOK CIR. #110	LONGWOOD FL

See Attached

7000002339647--9  
-11/06/97--01003--007  
\*\*\*\*165.00 \*\*\*\*165.00

10-31-97

8. Name and Address of Current Registered Agent

HERPE, ROBERT G.

~~601 SWEETWATER CLUB CIR.~~ 380 GOLF BROOK CIR.

LONGWOOD FL 32778

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.

Signature of Registered Agent

*Robert G. Herpe*  
REGISTERED AGENT MUST SIGN

Date 10-26-97

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☐

No ☒

(See other side for information on intangible tax.)  
WAS FILED

12. 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)(l), 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:

ROBERT G. HERPE, *Robert G. Herpe*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

407/774-0719

CR2E040 (8/97)

©

# Communication Ventures, Inc.

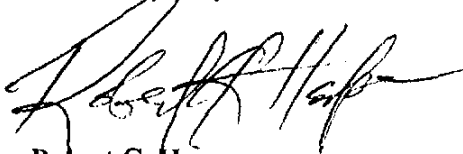
October 27, 1997

Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

To whom it may concern:

Re: your notice of Administrative Dissolution for Communication Ventures, Inc., This is to notify you that we did not receive an annual report form for the year in question at the specified mailing address. As this address has not been changed and it appears that we are not responsible for the error, we are enclosing our check for \$165.00, which we understand is the normal filling fee for the annual report. We have also filled out the attached document # J60423 as requested. Please let us know if you require any further information.

Yours very truly,



Robert G. Herpe  
President & Registered agent