

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS APPLICATION

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

1996 OCT 23 AM 9:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J93189

1. Corporation Name

R. G. A. INC.

Principal Place of Business

6735 LAND O' LAKES BLVD.
LAND O' LAKES FL 34639

Mailing Address
PO Box 1849
6735 LAND O' LAKES BLVD.
LAND O' LAKES FL 34639

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

2. New Principal Office Address, If Applicable

6735 (Same as Above)

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

P.O. Box 1849

Suite, Apt. #, etc.

LAND O' LAKES

City & State

Zip

FLA.
34639 U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

09/11/1987

5. FEI Number

59-2842043

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	FIELDS, HOWARD A	4004 DURANT RD.	VALRICO FL
VP	MITCHELL, THOMAS L	7821 LAND O'LAKES BLVD.	LAND O'LAKES FL
S	HOWELL, CARL C JR.	5035 LANCELOT	LAKELAND FL
T	MITCHELL, LEON W	14419 WADSWORTH DR.	ODESSA FL
VP	COOK, THOMAS S	914 E. HIGHLAND DR.	LAKELAND FL
VP	HOWELL, WILLARD	2100 PINEGROVE RD.	MULBERRY FL

8. Name and Address of Current Registered Agent

MITCHELL, LEON
14516 EHRlich RD.
TAMPA FL 33618

void

9. Name and Address of New Registered Agent

Name

NANCY W. MITCHELL

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

6735 LAND O' LAKES BLVD

Suite, Apt. #, Etc.

6735

City

LAND O' LAKES

State
FL

Zip Code
34639

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

Thomas L Mitchell
REGISTERED AGENT MUST SIGN

Nancy W. Mitchell

Date 9/16/96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

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)(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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas L Mitchell
Nancy W. Mitchell, mng.

9/16/96
Date

996-3114
Daytime Phone #

CR2E040 (7/96)

48292

R. G. A. Incorporated

P.O. Box 1849 • Land O'Lakes, FL 34639 • (813) 996-7033

SIR:

PLEASE SEND ANY CORRESPONDENCE TO OUR MAILING ADDRESS

P.O. BOX 1849
LAND O'LAKES, FL. 34639

WE HAVE NOT RECIEVED ANY FORMS TO RENEW OUR CORPORATION,
DUE TO THE FACT THAT THEY ARE BEING MAILED TO OUR PHYSICAL
ADDRESS. WE DO NOT RECEIVE ANY MAIL THERE.

THIS IS WHY WE ARE ALMOST LATE WITH THIS RENEWAL.

LUCKILY WE WERE TRACED DOWN.

THANK YOU,

Nancy Mitchell
NANCY MITCHELL,

Ch#
\$225.00