

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FOR
REINSTATEMENT

FILED

02 OCT 28 AM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K87763

1. Corporation Name

KITCHEN & SONS, INC.

Principal Place of Business

2744 EDISON AVENUE
FT MYERS FL 33916-5306

Mailing Address

2744 EDISON AVENUE
FT MYERS FL 33916-5306

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

4. Date Incorporated or Qualified
To Do Business in Florida

05/12/1989

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0135881

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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	4 City / State / Zip
VP	KITCHEN, TERRY P	2744 EDISON AVE	FT MYERS FL
PSTD	KITCHEN, BARBARA	2744 EDISON AVE	FT MYERS FL

8. Name and Address of Current Registered Agent

BANSPACH, ALAN W ESQ.
8191 COLLEGE PARKWAY, STE. 304
FT MYERS FL 33919

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

REGISTERED AGENT MUST SIGN

Date 10-24-02

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
TERRY P KITCHEN

Date

Daytime Phone #

10-24-02 239-337-4880

CR12E040 (8/02)

10-24-02

TO WHOM IT MAY CONCERN
I did NOT RELEV THE FIRST
APPLICATION IN THE MAIL

THANK

TEARY KITCHEN

A handwritten signature in black ink, appearing to read "Terry Kitchen", with a stylized, flowing script.