

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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

DOCUMENT # K98014

1. Corporation Name
J AND J MOBILE HOME PARK, INC.

Principal Place of Business Mailing Address
P.O. BOX 99 P.O. BOX 99
ANTHONY FL 32617 ANTHONY FL 32617

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:
P.O. Box 70 P.O. Box 90
Suite, Apt. #, etc. Suite, Apt. #, etc.
Anthony Florida Anthony Florida
City & State City & State
32617 32617
Zip Country Zip Country
USA USA

4. Date Incorporated or Qualified To Do Business in Florida 06/26/1989
5. FEI Number 59-2962411
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 Number)	4 City / State / Zip
D	KROITOR, MICHAEL BARRY	9508 NW 30 ST.	CORAL SPRINGS FL
D	KROITOR, LINDA	9508 NW 30 ST. 2401 SE 13 STREET	CORAL SPRINGS FL OCALA FL 34471
D	KROITOR, FRAN	9508 NW 30 ST.	CORAL SPRINGS FL
D	QUENTZEL, PAUL	3055 HAMPTON PL	BOCA RATON FL
P	QUENTZEL, GAYLE GALE	3055 HAMPTON PL	BOCA RATON FL
B 3/4/99 98-99AR 100002799951-4 -03/09/99--01087--018 ****150.00 ****150.00			

8. Name and Address of Current Registered Agent

KROITOR, MICHAEL L
COUNTRY ROAD #200-A
BOX 99
ANTHONY FL 32617-6301

9. Name and Address of New Registered Agent

Name
BRIAN S. BEHAR
Street Address (P.O. Box Number is Not Acceptable)
2999 NE 191 ST
Suite, Apt. #, Etc
SUITE 800
City
AVENTURA,
-03/09/99--01087--018
****150.00 ****150.00
FL 33180

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
REGISTERED AGENT MUST SIGN

Date 2-15-99

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.)

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)(j), 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: Gale L. Quentzel President 2/16/99 352 623 7001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2040 (9/98)

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J & J Mobile Home Park Inc.

PO BOX 70
Anthony, FL 33467

Phone 352-622-7001
Fax 352-622-9167

February 16, 1999

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

RE: Document # K98014

Dear Sirs,

Unfortunately, I never received any of the notices regarding the annual report renewal as I did not have access to the corporate post office box. As the current President of this company I was shocked to learn that our annual report was never filed. I would appreciate any understanding in this matter.

Sincerely,


Gale L. Quentzel, President