

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

122

APPLICATION FOR REINSTATEMENT

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

APPROVED  
AND  
FILED

98 NOV 19 PM 2:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # K99609

1. Corporation Name

THE CARLTON GROUP OF BREVARD COUNTY, INC.

Principal Place of Business

Mailing Address

1185 TWO OAKS BLVD.  
MERRITT ISLAND FL 32952  
US

1185 TWO OAKS BLVD  
~~200 UTOPIA CIR~~  
MERRITT ISLAND FL 32952  
US

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business In Florida

07/03/1989

5. FEI Number

59-2981651

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)<br>1 | Name of Officers and/or Directors<br>2 | Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)<br>3 | City / State / Zip<br>4 |
|---------------|--|--|-------------------------|
| DP            | CARLTON, RONNA D.                      | 1185 TWO OAKS BLVD   | MERRITT ISLAND FL       |
|               |  |  |                         |
|               |  |  |                         |
|               |  |  |                         |
|               |  |  |                         |
|               |  |  |                         |
|               |  |  |                         |

500002696065--3  
-11/25/98--01004--014  
\*\*\*\*150.00 \*\*\*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CARLTON, RONNA D.  
1185 TWO OAKS BLVD  
MERRITT ISLAND FL 32952

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

*Ronna D. Carlton*  
REGISTERED AGENT MUST SIGN

Date 11-16-98

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)(f), 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:

*Ronna D. Carlton*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-16-98 (407) 294-5360  
Date Daytime Phone #

CR2EN40 (9/88)

2082

**The Carlton Group of Brevard County, Inc.**  
**1185 Two Oaks Blvd.**  
**Meritt Island, FL 32952**

November 17, 1998

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, Florida 32314

Re: Document # K99609

Dear Sir or Madam:

I was surprised to receive the attached dissolution from since I had not received the first notification. Upon further inspection, I noticed that the mailing address is incorrect. I have not lived at 280 Utopia Circle since 1994.

I spoke to Mr. Tyrone Scott of your office on Friday, November 13, 1998. He suggested that I request that you waive the late charges and I herewith do so. I also request that you reinstate my corporation and that the mailing address be corrected. I am aware that I must still remit a minimum fee of \$150.00. I am enclosing my check #1697 in that amount.

Sincerely,



Ronna D. Carlton  
President

Enc:

CC: E. Douglas Baker  
Retz Baker CPA