

APPLICATION FOR REINSTATEMENT  
 FLORIDA DEPARTMENT OF STATE  
 Katherine Harris  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED

00 JAN -6 AM 11:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L57500

1. Corporation Name

B. GOERS ENTERPRISES, INC.

Principal Place of Business  
3616 Harden Blvd.  
Lakeland, FL 33803Mailing Address  
~~XXXXXX Geoffrey Vining~~  
~~XXXXXX 129 S. Kentucky Ave.~~  
~~XXXXXX Suite 702~~  
~~XXXXXX Lakeland, FL 33801~~

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  
3616 Harden Boulevard4. Date Incorporated or Qualified  
To Do Business in Florida

03-15-90

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City &amp; State

City & State  
Lakeland, FL

59-2996122

Not Applicable

Zip

Country

Zip

Country

33803

Polk

6. CERTIFICATE OF STATUS DESIRED ☐ ~~STATE RETURN~~

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D/P/ T/S	Bruce Edward Goers	3616 Harden Boulevard	Lakeland, FL 33803
			800003105698--1
			-01/21/00--01004--026
			****815.00 ****815.00
			LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

C.G. Vining  
230 S. Florida Ave.  
Suite 501  
Lakeland, FL 33801Name  
C. Geoffrey Vining, P.A.

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

129 S. Kentucky Ave.

Suite, Apt. #, Etc.

Suite 702

City

Lakeland

State

FL

Zip Code

33801

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

9-27-99

11. This corporation owes 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)(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:

B.E. GOERS  
President

12-14-99

Date

863-647-2470

Daytime Phone #