## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Blatz

							(C)
	RPORATION STATEMENT		5	DEPARTMENT OF STATE (atherine Harris Secretary of State SION OF CORPORATIONS	01	FILED OCT 10 AN 9:08	
DOCUMENT # L87063					SE TAL	CRETARY OF STATE LAHASSEE FLORIDA	
PLANTATION LANDSCAPE COMPANY, INC.							
			3. Mailing O			9 <b>00004641</b> 6 10/18/0101	
961 13TH ST SW			961	I IBM ST SW			***10 <b>50.</b> 00
Suite, Apt. #, etc. Suite, Apt. #, etc.				etc.	4. Date incom	porsted or Qualified / /	
NAPLES FL City & Starte City & Starte						nesa in Florida 7///	70
34117 US			5. FEIN		5. FEI Number	2230784	Applied For Not Applicable
Zip	Cour		Zip	Country	6.	SE 75 Addit	ional Fee required
			3411		<u> </u>	for a Cert	Scate of Status
	7. Name and Address of Current Registered A						
	JOSEPH K. JACKSON					19-01	
	Street Address (P.O. Box Number is Not Acceptable)  961 13TH ST SW				TEMENT 71 AAM		
	Sulte, Apt. #, Etc.						14
	City NA	PLES			· · ·	State Zip Code FL 3417	1
8. i, being			ve named corpo	ration, am familiar with and accept the o	obligations of secti	on 607.0505 or 617.0503, F.S.	ê
8. i, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 617.0503, F.S.  Signature of Registered Agent							
9. Names	end Street Address	es of Each Officer and	t/or Director (Flo	rids nonprofit corporations must list at i	east 3 directors)		·
Titles	Name of Officers and/or Directors			Street Address of Each Officer and/or Director		City / State / Zlip	
P	EUNICE JACKSON			961 13TH ST SW		NAPLES, FI.	34117
VP.	JOSEPH R. JACKSON-			961-1374 ST SW		NAPLES, FI.	34117
ST	ROGER	2 JACKS	500	6905B JOHL	15 Rb	NAPLES, FI.	34114
			<u> </u>				
10. 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 filling 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 light 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:

PLANTATION LNDSCP CO

PAGE 01

Mailing Address 961-13th St. SW Naples, Ft. 34117 Phone: 485-7732



Office Address

Plantation Conditions Co.
Oct. 1 St. 10 St.
Naples, FL 34/17

I EUNICE JACKSON, PRESIDENT OF PLANTATION LANDSCAPE COMPANY, INC. HAVE NO INTENTION OF REVOKING DISALLUSION.

**EUNICE JACKSON** 

PRESIDENT

PLANTATION LANDSCAPE COMPANY, INC.