

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

06 OCT -3 AM 8:42

DOCUMENT # **N99000004959**

1. Corporation Name **Stone Circle Inc.**

2. Principal Office Address  
**2549 Clarinet Drive**

Suite, Apt. #, etc.

City & State  
**Orlando, Florida**

Zip Country  
**32837 Orange**

3. Mailing Office Address  
**2549 Clarinet Drive**

Suite, Apt. #, etc.

City & State **Orlando, Florida**

Zip Country  
**32837 Orange**

**REINSTATEMENT**

4. Date Incorporated or Qualified To Do Business in Florida **8/16/1999**

5. FEI Number  
**593603919**

Applied For  
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name  
**Janet Herrick**

Street Address (P.O. Box Number is Not Acceptable)  
**2549 Clarinet Drive**

Suite, Apt. #, Etc.

City  
**Orlando**

State Zip Code  
**FL 32837**

**000080385640**  
**10/03/06--01018--014 \*\*297 50**

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent **Janet Herrick**  
REGISTERED AGENT MUST SIGN

Date **9/28/06**

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/s/d	Janet Herrick	2549 Clarinet Drive	Orlando, FL 32837
v/r/d	Salome Harasty	3043 Homestead Oaks Dr.	Clearwater FL 33759
D/M	Margie Gray	37022 N. Thrill Hill Rd.	Eustis, FL 32736

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 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 contained in Chapter 119, 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:

**Janet Herrick Janet Herrick**

**9/28/06 407-247-5391**  
Date Daytime Phone #