

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1042

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 SEP 22 PM 4:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000006855

1. Corporation Name

SKIPPY'S BOBCAT SERVICE, INC

REINSTATEMENT 03-04

000041254640
09/22/04--01019--001 **300.00

2. Principal Office Address

461 20th ST SE

Suite, Apt. #, etc.

City & State

NAPLES FL

Zip

34117

Country

US

3. Mailing Office Address

461 20th ST SE

Suite, Apt. #, etc.

City & State

NAPLES FL

Zip

34117

Country

US

**4. Date Incorporated or Qualified
To Do Business in Florida**

1/13/00

5. FEI Number

65-0979451

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

SOUTHWEST PROFESSIONAL SERVICES OR SO, FL INC

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

13571 MCGREGOR BLVD #22

Suite, Apt. #, Etc.

City

FORT MYERS

State

FL

Zip Code

33919

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

[Signature] PRES

REGISTERED AGENT MUST SIGN

Date

8/30/04

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
<u>P</u>	<u>SCOTT GRAY</u>	<u>461 20th ST SE NAPLES FL 34117</u>	<u>NAPLES FL 34117</u>
<u>TS</u>	<u>TAMMY GRAY</u>	<u>461 20th ST SE</u>	<u>NAPLES FL 34117</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 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9-1-04

Daytime Phone #

CR2E081 (01/04)

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04 SEP 22 PM 4:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 30, 2004

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee FL 32314

RE: Reinstatement of Skippy's Bobcat Service, Inc.
P00000006855
461 20th St. SE
Naples FL 34117

Enclosed please find our check for \$300 for the reinstatement fee for 2003 and 2004. We moved back and forth between Naples FL and Jacksonville FL several times during 2003 and it appears the renewal notices were not forwarded to our new home. We did not realize that the annual reports were not paid until now.

Please abate the penalties and accept this payment and reinstate the corporation because of the above reasons.

Thank you,

Scott Gray, President
Skippy's Bobcat Service, Inc.

