

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FOR
REINSTATEMENT

FILED

02 NOV -7 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
100008888871
11/07/02--01049--0162**150.00

DOCUMENT # P00000017211

1. Corporation Name

ROYAL PALM CONSTRUCTION, CO.

Principal Place of Business

411 LA PENINSULA BLVD.
NAPLES FL 34113

Mailing Address

411 LA PENINSULA BLVD.
NAPLES FL 34113

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Data Incorporated or Qualified
To Do Business in Florida

02/14/2000

5. FEI Number

59-3745053

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PSD	DONATO, JEFF	411 LA PENINSULA BLVD.	NAPLES FL 34113
VTD	MAYERHOFER, HEIDI I	411 LA PENINSULA BLVD.	NAPLES FL 34113

8. Name and Address of Current Registered Agent

DONATO, JEFF
411 LA PENINSULA BLVD.
NAPLES FL 34113

9. Name and Address of New Registered Agent

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. or 617.0505, F.S.

Signature of
Registered Agent

[Signature]
REGISTERED AGENT MUST SIGN

Date

NOV - 4 02

11. 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

11-4-02

Daytime Phone #

239

642-1417

CR2E040 (8/02)

November 4, 2002

Dear Sirs:

We are enclosing our check for \$150. - to reinstate this business Royal Palm Construction, Co.

We never received the first notice - we called your agency - said, "to write letter stating this and to include check for \$150. -

Thank you for your patience.

1/4/1 Donato

Any questions please don't hesitate to call.

(239) 642-1417

(239) 404-4400