

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 DEC -5 PM 12:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000039653

1. Corporation Name

T & S POOL & TILE, INC.

Principal Place of Business

6033 34TH ST. W. #94  
BRADENTON FL 34210-3615

Mailing Address

6033 34TH ST. W. #94  
BRADENTON FL 34210-3615



REINSTATEMENT 02

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. Date Incorporated or Qualified  
To Do Business in Florida

04/14/2000

5. FEI Number

65-0997832

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
<del>P</del>	TINDELL, MARK D	<del>3530 ALOHA DR.</del> 6033 34TH ST. W. #94	<del>SARASOTA FL 34232</del> Bradenton, FL 34210-3615
V	TINDELL, BRIAN S.	6033 34TH ST. W. #94	Bradenton, FL 34210-3615
T	Leslie, Timothy C.	1905 HARVARD AVE.	Bradenton, FL 34210
S	TINDELL, TRAVIS A.	5615 69TH ST. E.	Palmetto, FL 34232

7000003370897  
12/05/02--01037--008 \*\*750.00

8. Name and Address of Current Registered Agent

TINDELL, MARK D  
3530 ALOHA DR. 6033 34TH ST. W. #94  
SARASOTA FL 34232 Bradenton, FL 34210-3615

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

*Mark D. Tindell* **SIGNATURE REQUIRED**

REGISTERED AGENT MUST SIGN

Date

12/2/02

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:

*Mark D. Tindell* **SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/2/02

Daytime Phone #

941-284-5553

CR2E040 (8/02)