

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Section 607 Harris
DIVISION OF CORPORATIONS

DOCUMENT # P00000083139

1. Corporation Name

RICH'S INTERIOR TRIM CARPENTRY, INC.

Principal Place of Business

Mailing Address

500 NASH LANE
PORT ORANGE FL 32127

500 NASH LANE
PORT ORANGE FL 32127

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

08/28/2000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

6.

Not Applicable

Zip

Country

Zip

Country

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
D	MURRAY, RICHARD	500 NASH LANE	PORT ORANGE FL 32127
			000004716850--5 -12/10/01--01089--004 ***750.00 ***750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LOGUIDICE, JOSEPH A
661 BEVILLE ROAD
SUITE #210
SOUTH DAYTONA FL 32119

Name

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

Suite, Apt. #, etc.

City

State

Zip Code

Richard Murray
500 Nash Lane
Port Orange
Port Orange FL 32127

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.

Signature of
Registered Agent

Date 10-11-01

REGISTERED AGENT MUST SIGN

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:

Richard Murray
Richard Murray

Date

Daytime Phone #

10-11-01