

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 NOV -4 PM 1:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

20

DOCUMENT # P00000117850

1. Corporation Name

EXECUTIVE HOME CLEANING SERVICE, INC.

Principal Place of Business

6705 9TH AVENUE NW.  
BRADENTON FL 34209

Mailing Address

6705 9TH AVENUE NW.  
BRADENTON FL 34209



800008786888

11/04/02--01077--013 \*\*150.00

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

01/02/2001

5. FEI Number

65-1069807

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
Pres.	LINDA MAGUIRE	6705 9th Ave NW.	Bradenton, FL 34209

8. Name and Address of Current Registered Agent

WICKMAN & WYCKOFF, P.A.  
4909 MANATEE AVENUE WEST  
BRADENTON FL 34209

9. Name and Address of New Registered Agent

Name  
LINDA MAGUIRE  
Street Address (P.O. Box Number is Not Acceptable)  
6705 9th Ave N.W.  
Suite, Apt. #, Etc.

City  
Bradenton

State

FL

Zip Code

34209

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 REQUIRED  
Linda Maguire  
REGISTERED AGENT MUST SIGN

Date

10/30/02

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 REQUIRED  
Linda Maguire  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/30/02

CR2E040 (8/02)

10/30/02

To Whom It May Concern:

Recently I received a Reinstatement notices in the mail for \$750.00.

I am a small cleaning business with only one employee and just started 1 1/2 years ago and was unaware of a reinstatement fee. My current registered agent failed to notify me so I was very shocked & upset when I received it. Please accept my check for \$150.00 for 2001. I promise that in the future I will pay on time for the upcoming fee for 2002 and years to come.

Thank You for  
Your Assistance

Linda Maguire

Executive Home Cleaning  
P.O. Box 488  
Bradenton, FL 34206

FEI #65-1069807

(941) 795-8848