

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 MAY 17 PM 12:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

Humanitico, Inc.

2. Principal Office Address

3987 Stonestrow Ct.

Suite, Apt. #, etc.

n/a

City & State

Naples, FL

Zip

34109

Country

USA

3. Mailing Office Address

3987 Stonestrow Ct.

Suite, Apt. #, etc.

n/a

City & State

Naples, FL 34109

Zip

34109

Country

USA

REINSTATEMENT

03-04

900036524289

05/17/04--01082--008 \*\*150.00

4. Date Incorporated or Qualified  
To Do Business in Florida

1/16/2001

5. FEI Number ( taxpayer I.D. # )

59-3701710

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

Kristen M. Conroy

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

7492 Treeline Dr

Suite, Apt. #, Etc.

City

Naples

State

FL

Zip Code

34119

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

Kristen M. Conroy

REGISTERED AGENT MUST SIGN

Date 4/16/2004

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
D	Mary-Zee Bowden	3987 Stonestrow Ct.	Naples, FL 34109

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:

Mary-Zee Bowden

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/04

Date

(234) 592-1541

Daytime Phone #

CR2E061 (01/04)

Humanitico, Inc.  
Mary-Zoe Bowden  
3987 Stonestrow Court  
Naples, FL 34109  
(239) 825-4134

Florida Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

April 12, 2004

Dear Division of Corporations,

I am sorry to admit that I failed to file my annual report with you last year. I'm sure it was due to the fact that I had moved twice within about 9 months (I sold my house, moved out to a rental while I built another home, then moved in to the new home when it was finished), so I never received the letter you normally send me, reminding me that it is filing time. I understand that since I never received the letter from you, my reinstatement fees can be waived and I only have to pay the \$150.00 administrative fees.

Please find the check for \$150.00 enclosed along with my paperwork to reinstate my business. Please note, also, the new address listed, so you can update your records and I can once again get your reminder notes, so I can be sure to file in a timely manner in the future.

Thank you very much for your consideration.

Sincerely,



Mary-Zoe Bowden  
Humanitico, Inc.