

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

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

DOCUMENT # P01000048135

1. Corporation Name

CALUSA PLASTERING, INC.

Principal Place of Business

27211 BELLE RIO DRIVE  
BONITA SPRINGS FL 34135

Mailing Address

27211 BELLE RIO DRIVE  
BONITA SPRINGS FL 34135

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

05/15/2001

5. FEI Number

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	ESCAJADILLO, MARIO A	27211 BELLE RIO DRIVE	BONITA SPRINGS FL 34135
VTD	WOODHULL, NATHANIEL	27211 BELLE RIO DRIVE	BONITA SPRINGS FL 34135

700008812127  
11/05/02--01100--014 \*\*150.00

8. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent

Name

Nathaniel Woodhull

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

27211 Belle Rio Drive

Suite, Apt. #, Etc.

City

Bonita Springs

State

FL

Zip Code

34135

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

*Nathaniel Woodhull*

REGISTERED AGENT MUST SIGN

Date

10/25/02

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:

*Nathaniel Woodhull*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/25/02

Daytime Phone #

CR2E040 (8/02)

**Hensley & Company PA**  
**10911 Bonita Beach**  
**Bldv Ste. 208-1**  
**Bonita Springs, FL 34135**

October 28<sup>th</sup>, 2002

Division of Corporations  
Uniform Business Report Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

**RE: Calusa Plastering**  
**P01000048135**

Dear Sirs:

Please find my client's Uniform Business Report and enclosed check for \$150.00 Please waive penalty and reinstate corporation as client has not received prior notices..

Respectfully,



Tammy Gartrell  
Hensley & Company, PA