

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

page 1 of 2

APPLICATION
FOR



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

FILED

02 NOV -6 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P01000066279

1. Corporation Name

HOLL-TOOLE, INC.

Principal Place of Business

722 ALBEE ROAD WEST
NOKOMIS FL 34275

Mailing Address

722 ALBEE ROAD WEST
NOKOMIS FL 34275

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

07/05/2001

5. FEI Number

59-3729574

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
PD	HOLLFELDER, MARK	2828 CLARK ROAD, #6 7467 CABBAGE PALM CT	SARASOTA FL 34231
VD	O'TOOLE, LARRY O'TOOLE	2828 CLARK ROAD, #6 6829 ARECA BLVD	SARASOTA FL 34231
S	HOLLFELDER, CARY	2828 CLARK ROAD, #6 7467 CABBAGE PALM CT.	SARASOTA FL 34231
T	O'TOOLE, ALICE	2828 CLARK ROAD, #6 6829 ARECA BLVD	SARASOTA FL 34231
			0000008841890 11/06/02--01146--020 **150.00

8. Name and Address of Current Registered Agent

WITTMER, STEVEN T
2014 FOURTH STREET
SARASOTA FL 34237

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

CR2E040 (8/02)

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] SIGNATURE REQUIRED

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] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
LARRY O'TOOLE

10/29/02
Date

(941) 484-2794
Daytime Phone #

STEVEN T. WITTMER, P.A.

ATTORNEY AT LAW

STEVEN T. WITTMER
BOARD CERTIFIED CIVIL TRIAL LAWYER
ALSO ADMITTED IN GEORGIA

2014 FOURTH STREET
SARASOTA, FLORIDA 34237
TELEPHONE: (941) 365-2296
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EMAIL: STWITTMER@SARASOTALITIGATOR.COM



Page 2

October 30, 2002

Florida Department of State
Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Re: Holl-Toole, Inc.

Dear Sir or Madam:

Enclosed please find the Application for Reinstatement for Holl-Toole, Inc. According to my clients, they never received the annual notification form from the Florida Department of State and, therefore, were unable to file their Annual Report. Similarly, I, as the Registered Agent, did not receive any notification from the Florida Department of State. Accordingly, I would request, on behalf of my clients, that any reinstatement fee or penalty fee be waived.

Please contact me should you have any questions.

Thank you.

Sincerely,

Steven T. Wittmer, Esq.
STW/ekb

Enclosure