

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 -7 PM 1:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000070508

1. Corporation Name

PADDOCK DESIGN GROUP, INC.

Principal Place of Business

6000 PARK OF COMMERCE BLVD.  
SUITE A  
BOCA RATON FL 33487

Mailing Address

6000 PARK OF COMMERCE BLVD.  
SUITE A  
BOCA RATON FL 33487

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

07/17/2001

5. FEI Number

13-4218856

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
D	LACHANCE, SUSAN	17615 FOXBOROUGH LANE	BOCA RATON FL 33496

400008863884

11/07/02--01037--010 \*\*150.00

10/11/02

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

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

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

REGISTERED AGENT MUST SIGN

Date 10/29/02

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  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/31/02 561-241-3800

CR2E040 (8/02)

Paddock Design Group, Inc.  
6000 Park of Commerce Blvd.  
Suite A  
Boca Raton, FL 33487  
(561) 241-3800

November 4, 2002

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314-6327

Dear Gentlemen:

This letter will serve as notification that Paddock Design Group, Inc. did not receive the prior uniform business reports or forms. Please waive the reinstatement fee.

Enclosed please find the completed application for reinstatement along with our check in the amount of \$ 150.00. Any questions please call me at (561) 241-3800, ext. 108.

Sincerely,



Susan Lachance, Director