

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000098756

1. Corporation Name

Florida Palm Growers Inc.

2. Principal Office Address

12697 Indian Rocks Rd

Suite, Apt. #, etc.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Largo FL

Zip

33774

Country

USA

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10-10-01

5. FEI Number

62-00-233885-76

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT

07-04

7. Name and Address of Current Registered Agent

Name

Richard L. Hzin Jr. Pres.

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

12697 Indian Rocks Rd.

Suite, Apt. #, Etc.

City

Largo FL

State

FL

Zip Code

33774

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

Richard L. Hzin Jr. Pres.

Date 1-7-04

REGISTERED AGENT MUST SIGN

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
P	Richard L. Hzin Jr.	12697 INDIAN ROCKS RD	LARGO FL 33774

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:

Richard L. Hzin Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-04

Date

727-639-0622

Daytime Phone #

CR2E081 (10/02)

To whom it may concern,

We did not receive our UBR notices for 2003. Enclosed please find a reinstatement fee of \$150.00 for 2003 and \$150.00 for 2004 on check number 1534 in the amount of \$300.00.

Thank you,

A handwritten signature in black ink, appearing to read "Richard L. Hain Jr.", with a stylized, cursive script.

Richard L. Hain Jr.

President

Florida Palm Growers