

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED
AND
FILED

05 MAR 21 PM 2:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # PO1000 116787

1. Corporation Name

Venice Drywall & Texturing, Inc

REINSTATEMENT 02-05

2. Principal Office Address

525 Morrison Ave

Suite, Apt. #, etc.

3. Mailing Office Address

PO Box 736

Suite, Apt. #, etc.

City & State

Englewood, FL

Zip 34223

Country USA

City & State

Nokomis, FL

Zip 34275

Country USA

4. Date Incorporated or Qualified
To Do Business in Florida

12/7/2001

5. FEI Number

52-2360062

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

Tony L. Ziegler

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

525 Morrison Ave

Suite, Apt. #, Etc.

City

Englewood, FL

State
FL

Zip Code

34223

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

Tony L. Ziegler
REGISTERED AGENT MUST SIGN

Date

3/16/05

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	Tony L. Ziegler	525 Morrison Ave	Englewood, FL 34223

200049201692
03/28/05--01006--001 **1800.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Tony L. Ziegler

3/16/05

Date

Daytime Phone #

3/16/05

CR2001 (01/04)

292

Venice Drywall & Texturing

P.O. Box 736
Nokomis, FL 34274

March 18, 2005

Florida Department of State
Divisions of Corporation
P.O. Box 6327
Tallahassee, Florida 32314

Re: Document Number P01000116787

To Whom It May Concern:

I didn't realize up until now that I have not renewed my corporation. With were are mail boxes are situated, apparently mail has not been delivered to my box properly. I have never received a renewal to reinstate for the years 2002, 2003, 2004 and 2005. I however corrected this problem, by obtaining a P.O Box.

I am asking for the years 2002, 2003, 2004 and 2005 be reinstated. I am also requesting abatement for the 600.00 reinstatement fee. I have enclosed a check in the total amount of \$1800.00 and I feel I have corrected the mailing problem that I have been having over the years. I appreciate your help in this matter.

Thank you.

Kind Regards,


Tony Ziegler
President