

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 DEC 11 AM 10:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000116860

1. Corporation Name

NUTS ACRES, INC.

Principal Place of Business

4700 KEEN CEMETERY RD
CALLAHAN FL 32011

Mailing Address

4700 KEEN CEMETERY RD
CALLAHAN FL 32011



600009504146

12/13/02--01043--002 **150.00

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

12/10/2001

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
D	COATS, KAREN R	4700 KEEN CEMETERY RD	CALLAHAN FL 32011
D	Boyd, Andrew R		
D	Boyd, Andrew R	4700 Keen Cemetery Rd	Callahan FL 32011

8. Name and Address of Current Registered Agent

FINANCIAL FOUNDATIONS, INC.
3150 SANDY RIDGE DR
CLEARWATER FL 33761

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

Karen R Coats
REGISTERED AGENT MUST SIGN

Date

11-1-02

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:

KAREN R COATS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11-1-02

Daytime Phone #

CR2E040 (8/02)

To: Florida Department Of State
Division Of Corporations

Re: Nuts Acres Inc.
Renewal
Reference # P01000116860

December 7, 2002

Mr. Justin Shivers:

Please acknowledge the enclosed copy of the referenced letter along with a copy of my renewal certificate. I had no prior notification that it was time for renewal nor was I explained the fees or renewal process. I fully intend to renew my status as a Corporation but was unaware of the filing necessary or the fees. I enclose my application along with my check for the \$150.00 renewal fee. I understand after speaking with your office that this is what should be done. The original filing of my Corporation was December 10, 2001.

I also am including a name change since I was recently married on August 4, 2002. If you have any additional questions, please feel free to contact me via mail or by calling 904-879-9245.

I appreciate your help in this matter.

Karen R. Boyd

Karen Coates Boyd
Nuts Acres Inc.
4700 Keen Cemetery Rd.
Callahan, Fla. 32011

TO Whom It may concern
Please change my
name from Karen Coates
to Karen R Boyd due
to marriage on 8-4-02

Thank You
Karen R Boyd