

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

112

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT 21 PM 3:51

DOCUMENT # P02000017641

1. Corporation Name

S.L.E.D., INC.

Principal Place of Business

Mailing Address

11016 CASA GRANDE CIRCLE
SPRING HILL FL 34608

11016 CASA GRANDE CIRCLE
SPRING HILL FL 34608

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT 03

4. Date Incorporated or Qualified
To Do Business in Florida

02/14/2002

5. FEI Number

04-3602884

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	HOVATTER, SANDRA L	11016 CASA GRANDE CIRCLE	SPRING HILL FL 34608

600023965336
10/21/03--01044--001 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HOVATTER, SANDRA L
11016 CASA GRANDE CIRCLE
SPRING HILL FL 34608

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

Sandra L. Hovatter

REGISTERED AGENT MUST SIGN

Date

10/15/03

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:

Sandra L. Hovatter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/15/03

Daytime Phone #

352-279-2411

CR2E040 (7/03)

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S.L.E.D, Inc.

11016 Casa Grande Cir.
Spring Hill, Florida 34608

Phone: 352-279-2411
Fax: 352-279-2411 call 1st
Email: sled@tampabay.rr.

To Whom it May Concern:

I did not receive the annual report that was mentioned. When I called in they said to send this letter and the check for \$150.00 which I have enclosed. Please let me know where I can find this annual report in which you speak of. When I asked questions on this matter of a CPA they said there were a lot of people who did not receive this report this year and perhaps there was some kind of mix-up. They also mentioned something about no report being sent out at all next year put that the info will be on the internet. Is this correct information?

Sincerely,



Sandra Hovatter