

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 DEC -2 PM 2:18

DOCUMENT # P02000038971

1. Corporation Name

LOU NAGY CARPENTRY, INC.

Principal Place of Business

Mailing Address

7318 GONDOLA DR
ORLANDO FL 32809

7318 GONDOLA DR
ORLANDO FL 32809



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

REINSTATEMENT 03

2. New Principal Office Address, If Applicable

1128 PLATO AVE.
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

1128 PLATO AVE.
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

04/10/2002

5. FEI Number

03-0422125

Applied For

Not Applicable

City & State

ORLANDO FLORIDA

City & State

ORLANDO FLORIDA

Zip

32809

Country

UNITED STATES

Zip

32809

Country

UNITED STATES

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	NAGY, LOUIS J	7318 GONDOLA DR	ORLANDO FL 32809
P	NAGY, LOUIS J	1128 PLATO AVE.	ORLANDO FL 32809

500024159925
11/06/03-01002-031 ***158.75

8. Name and Address of Current Registered Agent

NAGY, LOUIS J
7318 GONDOLA DR
ORLANDO FL 32809

9. Name and Address of New Registered Agent

Name
NAGY LOUIS J.
Street Address (P.O. Box Number is Not Acceptable)
1128 PLATO AVE.
Suite, Apt. #, Etc.

City
ORLANDO

State
FL

Zip Code
32809

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

LOUIS J. NAGY
REGISTERED AGENT MUST SIGN

Date 10-21-03

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:

PRESIDENT LOUIS J. NAGY / Louis J. Nagy 10-21-03 4075928401

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (7/03)

To Whom It May Concern,

I received only the 3rd notice and then called the help phone number. I was told to submit a letter stating I only received 3rd notice and made address corrections as necessary. Please reinstate the Lou Nagy Carpentry, Inc. company.

Thank You,

Louis J. Nagy
Lou Nagy Carpentry, Inc.
1128 Plato Ave.
Orlando, FL 32809
Document #P02000038971

P.S. I also paid \$8.75 to get a copy.