

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 OCT 13 AM 8:00

DOCUMENT # P02000050265

1. Corporation Name

T J ROOSTERS, INC.

Principal Place of Business

Mailing Address

2905 DUFF RD.
LAKELAND FL 33809

2905 DUFF RD.
LAKELAND FL 33809

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

4. Date Incorporated or Qualified
To Do Business in Florida

05/07/2002

5. FEI Number

71-0879635

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	HARRIS, JOHN T	120 W. BELVEDERE ST.	LAKELAND FL 33803
V	BALDWIN, TRACIE L	8715 SELPH RD.	LAKELAND FL 33810
P	HARRIS, John T	317 Interlachen PKwy	LAKELAND, FL 33801
T	HARTIN, Heather	8645 N. Campbell Rd	LAKELAND, FL 33810
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8. Name and Address of Current Registered Agent

BALDWIN, TRACIE
8715 SELPH RD.
LAKELAND FL 33810

9. Name and Address of New Registered Agent

Name

HARRIS, John T

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

317 Interlachen PKwy

Suite, Apt. #, Etc.

LAKELAND, FL 33801

City

State

FL

Zip Code

33801

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

John T. Harris

REGISTERED AGENT MUST SIGN

Date 10-8-03

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:

John T. Harris

JOHN T. HARRIS 10-8-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CH2E040 (7/03)



TJ ROOSTERS, INC.

**2905 DUFF ROAD
LAKELAND, FLORIDA 33809**

October 8, 2003

Division of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, Fl 32314-6327

To Whom It May Concern:

Please find enclosed a check in the amount of \$150.00 for our annual renewal fee.

Please be advised that we did not receive our original notice of the required uniform business report. Being a first year small business we are unfamiliar with the many requirements. We have also had many problems with receiving our mail, as well as with retaining office personnel.

Please consider this as a request to reinstate our corporation and wave our reinstatement fee.

Also, please see the address and registered agent changes on the application for reinstatement.

Thank you for your assistance in this matter.

Sincerely,

John Harris