

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1052

APPLICATION
FOR
REINSTATEMENT



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

FILED

03 OCT 17 PM 4:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000069983

1. Corporation Name

T-MAC PROPERTIES, INC.

Principal Place of Business

Mailing Address

3740 SW 56 COURT
OCALA FL 34474

3740 SW 56 COURT
OCALA FL 34474



600023881756
10/17/03--01030--025 **150.00

DS

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

4. Date Incorporated or Qualified
To Do Business in Florida

06/25/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

02-0622489

Not Applicable

Zip

Country

Zip

Country

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	PERMENTER, TOMMY D	3740 SW 56 COURT	OCALA FL 34474
D	MCALLISTER, MARTIN M	3740 SW 56 COURT	OCALA FL 34474
DS/T	PERMENTER, ROSEMARIE	3740 SW 56 CT	OCALA, FL 34474

REINSTATEMENT

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PERMENTER, TOMMY D JR
100 S ASHLEY DR STE 1500
TAMPA FL 33602

Name Rosemarie Permenter

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

3740 SW 56 CT

Suite, Apt. #, Etc.

City Ocala

State FL

Zip Code

34474

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

Rosemarie Permenter

REGISTERED AGENT MUST SIGN

Date 10-13-03

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:

Tommy D. Permenter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

352-854-1946

Daytime Phone #

CR20040 (7/03)

2012

10-14-03

Division of Corporations
Annual Report / Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

I did not receive prior UBR
notices.

Please reinstate T-Mac Properties, Inc.

Thank you.

Rosemarie Permenter, Sec/Treas.
3740 SW 56 COURT
Ocala FL 34474