

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 FEB 25 AM 9:25

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P02000100830

**1. Corporation Name**

Groundcover Landscaping, Inc.

200030560722  
03/16/04--01049--020 \*\*8.75

**2. Principal Office Address**

1910 Running Horse Trail

**3. Mailing Office Address**

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St. Cloud, Florida

City & State

Zip  
34771

Country  
USA

Zip

Country

**REINSTATEMENT**

02-10-04 01079 012

03-04  
\$ 300.00

**4. Date Incorporated or Qualified  
To Do Business in Florida 09/20/02**

**5. FEI Number**  
141858592

Applied For  
Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☒ \$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name  
Bradley E. Keene

Street Address (P.O. Box Number is Not Acceptable)  
1910 Running Horse Trail

Suite, Apt. #, Etc.

City  
St. Cloud

State  
FL

Zip Code  
34771

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of  
Registered Agent

*[Signature]*

Date 02/24/04

REGISTERED AGENT MUST SIGN

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Bradley E. Keene	1910 Running Horse Trail	St. Cloud, Florida 34771
VP	Kristen R. Keene	1910 Running Horse Trail	St. Cloud, Florida 34771

**10. 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: *X*

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/24/04

Date

(407) 957-1622

Daytime Phone #

CR2E081 (01/04)

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## GROUND COVER LANDSCAPING, INC.

Florida Department of State  
Division of Corporations  
Corporate Filings  
Post Office Box 6327  
Tallahassee, Florida 32314

RE: Request for Waiver of Reinstatement Fee  
Doc. # P02000100830  
Ground Cover Landscaping, Inc.

To Whom It May Concern:

This letter is to request a waiver of the reinstatement fee for the above corporation. The undersigned did not receive an Annual Report Form from the Division of Corporations and therefore was unaware that the corporation was being dissolved.

Enclosed is a Reinstatement Application along with a check for \$300, \$150 for 2003 and \$150 for 2004. Per an examiner in your office, the \$300 should cover the Annual Report fees for both 2003 and 2004.

Should you require anything further, please do not hesitate to contact me. Your assistance in this matter is greatly appreciated.

Bradley E. Keene  
President