

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

04 FEB 23 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000110545**

1. Corporation Name

SEABROOK STONE COMPANY, INC.

Principal Place of Business

Mailing Address

5420 CYPRESS RD
PLANTATION FL 33317

5420 CYPRESS RD
PLANTATION FL 33317



REINSTATEMENT

03-04

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

10/11/2002

5. FEI Number

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
D	SEABROOK, JOHN	5420 CYPRESS RD	PLANTATION FL 33317

100027443151
01/22/04--01076--005 **150.00

100027443151
02/03/04--01072--003 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RICHARD S. PILLINGER, P.A.
3300 UNIVERSITY DR STE 901
CORAL SPRINGS FL 33065

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

[Signature]
REGISTERED AGENT MUST SIGN

Date

2/11/04

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN SEABROOK

Date

1-20-04

Daytime Phone #

954 812-4883

CP2E040 (7/03)

Seabrook Stone Company (Inc.)?

5420 Cypress Road
Plantation, FL 33317-2623

954 587-7116 ph

954 797-9777 fx

954 818-4883 cell

sscproject@msn.com

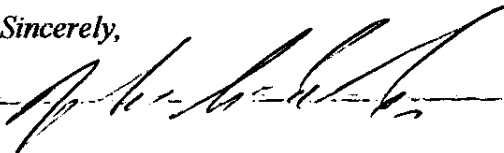
john4014@msn.com

January 20, 2004

To whom It May Concern,

Please be advised that I never received the information sent out requesting I file the form for my corporation. Please check your records to see when it was sent and to what address it was to go to. I would like to receive the information and return it so to reinstate my corporation. All of the previous information is the same. We are just missing the form that was to be filed.

Sincerely,



YEAR NOT RECEIVED

2003

THANK
YOU

