

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

112

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 24 PM 12:22

DOCUMENT # **P02000120805**

1. Corporation Name

SHERI ANN CHEANEY, P.A.

Principal Place of Business

Mailing Address

~~5201 SW 31 AVE #146~~
~~FT LAUDERDALE FL 33312~~

~~5201 SW 31 AVE #146~~
~~FT LAUDERDALE FL 33312~~



600024074396
10/24/03--01016--027 **150.00

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

2. New Principal Office Address, If Applicable

4498 Foxtail Lane
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

4498 Foxtail Lane
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

11/12/2002

5. FEI Number

41-2097402

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	CHEANEY, SHERI A	5201 SW 31 AVE #146	FT LAUDERDALE FL 33312

REINSTATEMENT 03

8. Name and Address of Current Registered Agent

CHEANEY, SHERI A
5201 SW 31 AVE #146
FT LAUDERDALE FL 33312

9. Name and Address of New Registered Agent

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

Sheri A Cheaney
REGISTERED AGENT MUST SIGN

Date

10/16/03

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)(l), 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:

Sheri A Cheaney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sheri Ann Cheaney

Date

10/16/03

Daytime Phone #

954-306-0301

CR2E040 (7/03)

October 16, 2003

Re: Sheri Ann Cheaney, PA/UBR Notices

To Whom It May Concern:

This letter is in reference to the two prior UBR notices that I have never received. I have not lived at the address you have on record (5201 SW 31st Ave Ft.Lauderdale, Fl 33312) in over a year. I have problems with my mail being forwarded, and have made constant complaints with the postal service. In addition to that, I just recently started using my company due to the fact that I am pregnant and have been on bed rest for the last eight months. I have no employees, and because I haven't been working, I completely forgot about my company. I just started using it a month ago. I have a new address, and I thought I had changed it through your office. My apologies for the confusion, I had no intention of neglecting the proper procedures for keeping my company in good standing. I will include my new address and a check for \$150.00 along with the appropriate reinstatement forms. Again, please except my apologies for this over sight. It has been a very rough eight months.

Regards,

Sheri Ann Cheaney

4498 Foxtail Lane
Weston, Fl 33331
954-306-0301