

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 JAN 22 AM 8:45

DOCUMENT # P03000003254

**1. Corporation Name**

Oreck Vacuums of the Treasure Coast, Inc.

REINSTATEMENT  
05-07

**2. Principal Office Address**

1609 NW Federal Hwy

Suite, Apt. #, etc.

City & State

Stuart, FL

Zip

34994

Country

**3. Mailing Office Address**

Suite, Apt. #, etc.

City & State

Zip

Country

CR2E081 (12/05)

**4. Date Incorporated or Qualified  
To Do Business in Florida** 1/9/2003

**5. FEI Number**

90-0174880

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

William J Fennessy

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

1609 NW Federal Hwy

Suite, Apt. #, Etc.

City

Stuart

State

FL

Zip Code

34994

**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

*William J Fennessy*  
REGISTERED AGENT MUST SIGN

Date 1-13-07

**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	William J Fennessy	1609 NW Federal Hwy	Stuart, FL 34994
S	Barbara H Claramunt	1609 NW Federal Hwy	Stuart, FL 34994

**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 contained in Chapter 119, 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:

*William J Fennessy*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-07

Date

Daytime Phone #

772-652-5514

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January 2<sup>nd</sup>, 2006

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Corporation Re-instatement  
P03000003254  
Oreck Vacuums of the Treasure Coast, Inc.

Dear Sir or Madam:

Enclosed you will find a copy of our Corporate Reinstatement form for our corporation, Oreck Vacuums of the Treasure Coast, Inc. We were unaware that this corporation had been dissolved as you have been mailing the forms and information to our former address and evidently the post office was not forwarding them to us. As a result we have never received any forms or documentation to complete our annual reports. We had no intention of not filing and paying these fees and would wish to have this corporation re-instated immediately. In light of the situation, we would however request that you would abate the penalties on this re-instatement. I have enclosed a check in the amount of \$450 for the annual fee for 2005, 2006 & 2007.

Enclosed you will also find an Articles of Amendment to our Articles of Incorporation. We had contacted our accountant to complete a name change and discovered that the corporation had been dissolved in 2005 that prompted this letter. We have also enclosed the check in the amount of \$35.00 for the processing of the Articles of Amendment.

I thank you in advance for your cooperation and assistance in this matter and would request that this be processed as soon as possible.

Sincerely,

  
William J. Fennessy