

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

10 APR 22 PM 1:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P03000041987**

1. Corporation Name

Anchor Construction of Fort Myers, Inc.

900177069139
04/22/10--01028--009 **450.00

REINSTATEMENT 08-10

2. Principal Office Address - No P.O. Box #

10871 Shirley Lane

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

N. Fort Myers

City & State

Zip

33917

Country

US

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

7-15-1996

5. FEI Number

65-0316091

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

John F. Fralich

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

10871 Shirley Ln.

Suite, Apt. #, Etc.

City

N. Ft. Myers,

State

FL

Zip Code

33917

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

John F. Fralich

REGISTERED AGENT MUST SIGN

Date **4/15/2010**

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	John F. Fralich	10871 Shirley Ln.	N. Ft. Myers, FL 33917

JC 4/22

10. E-mail Address: **terryglennjd@yahoo.com**

(To be used for future annual report notification)

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. I further certify, 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:

John F. Fralich

John F. Fralich

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-2010 (239) 872-0916

Date

Daytime Phone #

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TERRY GLENN, P.A.
ATTORNEY AND COUNSELOR AT LAW
P.O. Box 100461
CAPE CORAL, FLORIDA 33910
PHONE: (239) 945-3270 TELEFAX: (239) 549-7243

April 20, 2010

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Application for Reinstatement – Anchor Construction of Fort Myers, Inc.

Dear Madam or Sir:

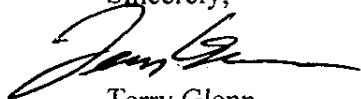
Enclosed please find an Application for Reinstatement and a check drawn on my firm's trust account in the amount of \$450.00 for my client, Anchor Construction of Fort Myers, Inc.

My client has certified that there was no mail delivery of prior notices for the year 2008 in which corporation was administratively dissolved for not sending the annual report along with payment of the fee. Further, the corporation did not receive notification by mail during the 2009 and 2010. The corporate mailing address is located on a dirt road in a very rural area of Lee County Florida, and there have been numerous delivery problems to this address in the past several years. We are in the process of filing an inquiry into this matter with the U.S. Postal Service.

To help alleviate the numerous notice problems my client has suffered in previous years, it is requested herein and on the application enclosed to please send any additional annual report notification to the electronic email address noted in the application, to wit:
terryglennjd@yahoo.com

If there are any questions, or if further documentation regarding lack of notice is necessary to complete the application of reinstatement, please contact my office at the above address and phone number, or by email as noted.

Sincerely,



Terry Glenn

Cc: client