

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 JUL -9 AM 11:05

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT #

PA3000059565

1. Corporation Name

THE ORMOND ASSOCIATES, INC.

Principal Place of Business

Mailing Address

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

2. New Principal Office Address, If Applicable

1 John Anderson Drive

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

680 John Anderson Drive

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

08/19/1993

5. FEI Number

59-3262303

Applied For

Not Applicable

City & State

Ormond Beach, FL

City & State

Ormond Beach, FL

Zip

32176

Country

Volusia

Zip

32176

Country

Volusia

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P/D	Ronald J. Pepper	680 John Anderson Drive	Ormond Beach, FL 32176
VP/D	Milton W. Pepper	680 John Anderson Drive	Ormond Beach, FL 32176
VP/ S/T/D	Leonard Pepper	310 West Jefferson Street	Tallahassee, FL 32301
			800002235458--S -07/10/97--01100--015 ****923.75 ****923.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

Leonard Pepper

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

310 West Jefferson Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

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.

Signature of
Registered Agent

Leonard Pepper

REGISTERED AGENT MUST SIGN

Date 07/08/97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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:

Leonard Pepper

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Leonard Pepper, VP/Sec

07/08/97

Date

(850) 224-2141

Daytime Phone #

CR2E040 (12/96)