

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # p930000062926

1 Corporation Name

Tyler concrete construction inc.
Principal Place of Business Mailing Address

New Smyrna Bch. Fl. 1298 Willard St.
32168

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

REINSTATEMENT

98-99

4 Date Incorporated or Qualified
To Do Business in Florida

5 FEI Number

692939813

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
1	2	3	4
president	Robert Wayne Tyler	1298 Willard St. USB, FL	New Smyrna Bch. Fl. 32168
			800003071258--4
			-12/15/99--01069--018
			****900.00 ****300.00

8 Name and Address of Current Registered Agent

GIGI BENNINGTON
G.B. CONSULTANTS
P.O. BOX 988
EDGEWATER, FL 32132

9 Name and Address of New Registered Agent

Name

Robert H. Bailey, Jr., Esquire

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

340 N. Causeway

Suite, Apt. #, Etc.

City

New Smyrna Beach

State

FL

Zip Code

32169

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

Robert H. Bailey, Jr.

REGISTERED AGENT MUST SIGN

Date

11/10/99

11 This corporation owes the current year
Intangible Personal Property Tax due June 30.

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:

R. Wayne Tyler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/10/99

Daytime Phone #

(904) 426-0542

KE

CR2001 (12/98)