

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

96 DEC 19 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P9400005087

1 Corporation Name

CHERRYTREE PROPERTIES, INC.

Principal Place of Business

Mailing Address

907 Klosterman Rd E.

P.O. Box 1681

Tarpon Springs, FL 34689

Blowing Rock, NC 28605

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

DO NOT WRITE IN THIS SPACE

2 New Principal Office Address, If Applicable

3 New Mailing Address, If Applicable

4 Date Incorporated or Qualified
To Do Business in Florida

01/21/1994

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5 FEI Number

Applied For

Not Applicable

City & State

City & State

59-3219870

Zip

Country

Zip

Country

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
D,P,T	Cammalleri, Peter J.	28th Floor 30 Board Street	New York, NY 10005
D,V,P	Adonnino, Anthony A	28th Floor 30 Board Street	New York, NY 10005
S	Puckett, Richard W	8960 Cone Orchard Ln	Blowing Rock, NC 28605
		P.O. Box 1681	
			200002038232-2 -12/20/95 ****79,061****575.00

REINSTATEMENT

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Richard W Puckett
907 Klosterman Rd E
Tarpon Springs, FL 34689

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City
State Zip Code
Tarpon Springs, FL 34689

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

Richard W Puckett

REGISTERED AGENT MUST SIGN

Date *Dec 3, 1996*

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Richard W. Puckett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Richard W Puckett 12/3/96 704-295-9961

CR2E043 (12/95)