

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 APR -5 PM 12: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000026452

1. Corporation Name

MAPLE INVESTMENT, INC.

Principal Place of Business

1270 WICKHAM ROAD
MELBOURNE FL 32935

Mailing Address

1270 WICKHAM ROAD
MELBOURNE FL 32935

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

****150.00 ****150.00

04/07/1994

5. FEI Number

59-3231740

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
BAUER, GERALDINE M	BAUER, GERALDINE M	1270 WICKHAM ROAD	MELBOURNE FL 32935
			100005308071--8 -04/19/02--01045--012 ****150.00 ****150.00
			100005308071--8 -04/19/02--01045--014 *****8.75 *****8.75

01-02 482

8. Name and Address of Current Registered Agent

BAUER, GERALDINE M
1270 WICKHAM ROAD
MELBOURNE FL 32935

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Geraldine M. Bauer

REGISTERED AGENT MUST SIGN

Date 10-25-01

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 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:

Geraldine M. Bauer - GERALDINE M. BAUER

10-25-01 (321) 259-3917

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR-ED40 (8/01)

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4-2-02

DEAR Ms HARRIS,

MY CERTIFICATE FOR CORPORATION
LAPSED LAST YEAR DUE TO MY HAVING
SURGERY. I HAVE BEEN TRYING TO COMPLETE
THE PROCESS BUT UNFORTUNATELY I SEEM TO
HAVE TO KEEP SENDING PAYMENTS. I TRULY
THOUGHT THE LAST AMOUNT SENT WOULD
COVER THE COST OF THE CERTIFICATE NEEDED,
EVIDENTLY NOT SO. PLEASE HAVE SOMEONE
IN YOUR OFFICE CORRECT AND CLEAR THIS
MATTER. IF NEEDED PLEASE HAVE THEM
CALL AT MY HOME PHONE NUMBER 321-253-1558
OFFICE NUMBER 321-259-3917
OR SALON NUMBER 321-773-9169

THANKING YOU IN ADVANCE FOR
YOUR HELP IN CLEARING THIS MATTER.

Geraldine M. Bauer
GERALDINE M. BAUER
PRES - MAPLE INVEST, INC.
1270 N. WICKHAM RD.
MELBOURNE, FL 32935