

MAR. 2. 2007 1:17PM

CAPITAL CONNECTION

NO. 6116 P. 1

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS**FILED**

07 MAR -6 AM 10:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDADOCUMENT # **P94000089001**

1. Corporation Name

RR Property Maintenance Service, Inc.

600092345546

03/13/07--01007--017 **2250.00

2. Principal Office Address

330 North Street

3. Mailing Office Address

P.O. Box 520389

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Longwood, FL

City & State

32752

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

1995

5. FBI Number

593294566

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐SF 75b Additional Fee required
for a Certificate of Status**REINSTATEMENT** 1995 2007

7. Name and Address of Current Registered Agent

Name

Richard B Renaud

Street Address (P.O. Box Number Not Allowed)

330 North Street

Suite, Apt. #, Etc.

City

Longwood

State
FLZip Code
32752

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*Richard B Renaud*

REGISTERED AGENT MUST SIGN

Date

3/5/07

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
D	RICHARD B. RENAUD	330 NORTH ST.	LONGWOOD, FL 32752

10. 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(2)(c), 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:

Richard B Renaud
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/07

Date

407-466-5639

Daytime Phone #

B. Mitchell

MAR 6 2007