

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # **P94000092689**

1. Corporation Name

**COLONIAL DONUTS, INC.**

Principal Place of Business

Mailing Address

2217 E. COLONIAL DRIVE  
ORLANDO FL

10725 E. COLONIAL DRIVE  
ORLANDO FL 32817

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

4. Date Incorporated or Qualified  
To Do Business in Florida

12/23/1994

5. FEI Number

59-3287091

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
P	CAFUA, FERNANDO	84 CASTLEMERE PLACE	NORTH ANDOVER MA
C	SMALL, KEVIN President	9734 TATTERSALL AVE	ORLANDO FL
			300004706843--9 -12/05/01--01085--012 ***750.00 ***750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SMALL, KEVIN  
9734 TATTERSALL AVENUE  
ORLANDO FL 32817

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

*Kevin Small*

Date 10-25-01

REGISTERED AGENT MUST SIGN

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:

*Kevin Small*

Kevin Small President 10-25-01

Date

Daytime Phone #

407-341

3797

FILED

01 NOV - 1 AM 10:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



REINSTATEMENT

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CR2E040 (8/01)