

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. ...
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 MAY 11 AM 11:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 97-98 AR
15000004637

1. Corporation Name:

TRI-COUNTY CYCLE, INC.

Principal Place of Business

Mailing Address

2112 East Main St.
Leesburg FL 34748

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

2. New Principal Office Address, If Applicable

1007 South 14TH Street

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Leesburg FL

Zip

34748

Country

USA

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

1/10/95

5. FEI Number

59-3301700

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
D/P/T	Judith Kyle	27910 County Road 42	Paisley FL 32767
S	Shane Jones	39029 Emerald Island Road	Leesburg FL 34788

500002526155--8
-05/15/98--01111--003
****315.00 ****315.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Sherrie L. Paskiet
2502 E. Orange Ave.
Eustis FL 32726

Name

Judith Kyle

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

27910 County Road 42

Suite, Apt. #, Etc.

City

Paisley

State

FL

Zip Code

32767

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

Judith Kyle

REGISTERED AGENT MUST SIGN

Date

5/4/98

11. This corporation owes or has paid 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:

Judith Kyle

Judith Kyle

5/4/98

352-365-6095

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2040 (1/98)

2

TRI-COUNTY CYCLE, INC.
1007 SOUTH 14TH STREET
LEESBURG FL 34748

May 4, 1998

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

Attention: Ms. Sprather

Dear Ms. Sprather:

Enclosed please find a completed application for reinstatement for Tri-County Cycle, Inc. As we discussed in our phone conversation, I had moved my business location and did not receive the annual report forms for 1997 and 1998. The forwarding instructions must have expired. I am enclosing our check for \$315.00 per your instructions for the years 1997 and 1998.

Thank you for your assistance in resolving this matter.

Sincerely,

Judith Kyle
President