PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## APPLICATION FOR REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P95000033582**

1. Corporation Name

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 NOV 19 AM 9: 04

R&R HOME BUILDERS, INC.										
•	Place of Busine ETTO AVE. FL 32578	oss	230 PALM	Mailing Address  230 PALMETTO AVE. NICEVILLE FL 32578 US			REINSTATEMENT 97			
2. New P	rincipal Office	3. New M	ough incorrect information and enter correction below.  3. New Mailing Office Address, If Applicable			Date Incorporated or Qualified     To Do Business in Florida     O5/01/1995				
				Sulte, Apt. #, etc.			5. FEI Number			
City & Sta	te		City & Stat	City & State			Not		Not Applicable	
Zip	!	Country			Country		6. CERTIFICATE OF STATUS DESIRED S8		3.75 Additional Fee required for a Certificate of Status	
7. Names	and Street Ad	Idresses of Each Officer	and/or Director (I	lorida nonprof	it corporal	tions must list at lea	ast 3 directors)			
Title(s)	itile(s) Name of Officers and/or Directors 2			Street Ac Officer a 3 (Do NO1 Use Pos			r	City / State / Zip		
P	EUBANKS	, RANDALL L		230 PALMETTO A				NICEVILLE FL 32578		
								010002353 -11/20/97- ****750.00		
٠									(>0)	
8. Name and Address of Current Registered Agent THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE CORAL GABLES FL 33134					9. Name and Address of New Registered Agent  Name RANDALL EUBANKS Street Address (P.O. Box Number is Not Acceptable) 230 PALMETTO AVE.  Sulte, Apt. #, Etc.					
40 1 5-1-						NICE VI	11 E	F	ate Zip Code L 325¶8	
		e registered agent of the undall El	REGISTERED	 		п апо всеерт ше о	Dilgations of 580	Date///4/-	97	
		ration owes or Personal Prop				ar Yes ⊠	No 🗆		side for information tangible tax.)	
								hapter 607 or 617, F.S. I furth is of section 607.0401 or 617		

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: Caude LL Control Report R

CR2E040 (8/97