

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
ANDREW B. MORTHAM
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 NOV 19 AM 9:04

DOCUMENT # 995000033920

1. Corporation Name
CASA BLANCA LANDSCAPING, INC.

Principal Place of Business
150 MEADOW BLVD.
SANFORD, FL. 32771

Mailing Address
P.O. Box 951003
LAKE MARY, FL. 32795

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		4. Date Incorporated or Qualified To Do Business in Florida 4/25/95	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-332 0889	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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
C/P/V/P/S	ROBERT O. RITTER	150 MEADOW BLVD.	SANFORD, FL. 32771
T	EMISSA P. RITTER	150 MEADOW BLVD.	SANFORD, FL. 32771

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****173.75 ****173.75

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
ROBERT O. RITTER 150 MEADOW BLVD. SANFORD, FL. 32771		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code FL	

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 REGISTERED AGENT MUST SIGN Date 11/17/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. 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: ROBERT O. RITTER 11/17/97 (407) 321-3357

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

P95000033920



CASA BLANCA
LANDSCAPING

(12)

TO WHOM IT MAY CONCERN:

ENCLOSED PLEASE FIND MY ANNUAL REPORT FEE
OF 61.25 . I AM NOT USING THE REINSTATEMENT
FORM BECAUSE THIS IS THE FIRST AND ONLY FORM
I HAVE RECEIVED REGARDING THIS ISSUE THIS YEAR.

FEI # 59-3320889.

THANK YOU,

ROBERT RITTER