

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 OCT 21 AM 10:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000040242

1. Corporation Name

FUTCH'S LANDSCAPING, INC.

Principal Place of Business

244 SILVER LAKE RD.
PALATKA FL 32177
US

Mailing Address

P.O. BOX 725
PALATKA FL 32178
US

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

05/19/1995

5. FEI Number

59-3318812

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	FUTCH, DARYLL W	244 SILVER LAKE RD.	PALATKA FL
V	RABURN, KIM F	RT. 4 BOX 312	PALATKA FL 32177

8. Name and Address of Current Registered Agent

FUTCH, DARYLL W
244 SILVER LAKE RD.
PALATKA FL 32177

9. Name and Address of New Registered Agent

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

REGISTERED AGENT MUST SIGN

Date

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2

FUTCH'S LANDSCAPING, INC.
P. O. Box 725
Palatka, FL 32177

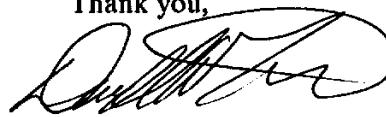
October 18, 1999

Division of Corporations
Annual Report/Reinstatement Section
P. O. Box 6327
Tallahassee, FL 32302-1500

RE: Application for Reinstatement
FEI # 59-331812
Document # P95000040242

My original Annual Report was submitted with check # 5736 dated July 12, 1999 (see attached copy). A letter of rejection was never received with the notification that our original report was not signed. As per our telephone conversation on October 15th I am submitting the Application for Reinstatement along with this letter as a replacement for the original Annual Report.

Thank you,

A handwritten signature in black ink, appearing to read 'Darryl Futch', with a large, stylized flourish at the end.

Darryl Futch
President