

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

98 MAR -2 PM 2:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000040284

1. Corporation Name

EXCALIBUR BUILDERS INC.

Principal Place of Business

Mailing Address

14 IROQUOIS TR.
ORMOND BCH. FL.
32174

14 IROQUOIS TRAIL
ORMOND BCH. FL.
32174

500002451875--0
-03/10/98--01033--012
****900.00 ****900.00

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

1985

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

650585055

Not Applicable

Zip

Country

Zip

Country

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PRES.	DAVID GRANDE	14 IROQUOIS TRAIL ORMOND BCH. FL.	ORMOND BCH. FL. 32174
V.P.	NANCY GRANDE	14 IROQUOIS TRAIL	ORMOND BCH. FL. 32174

REINSTATEMENT 97-98

Q. Allen
3/2/98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

DAVID GRANDE

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

14 IROQUOIS TRAIL

Suite, Apt. #, Etc.

0

City

ORMOND BCH. FL.

State

Zip Code

FL

32174

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

David Grande

REGISTERED AGENT MUST SIGN

Date 2/10/98

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:

David Grande DAVID GRANDE

Date

2/10/98 909 615

Daytime Phone # 8637

CR20040 (1/98)