

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 APR 18 PM 1:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # ~~P5000041341~~

1. Corporation Name ~~P95000041341~~
HICKEY ORGANIC GRINDING, INC.

2. Principal Office Address

4531 VILLAGE WOOD DR.

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. BOX 2772

Suite, Apt. #, etc.

City & State

ORLANDO, FL.

Zip
32835

Country
ORANGE

City & State

WINDERMERE, FL.

Zip
34786

Country
ORANGE

REINSTATEMENT **99-00**

4. Date Incorporated or Qualified
To Do Business in Florida

5-13-95

5. FEI Number

59-3320686

Applied For

☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

JOHN W. HICKEY

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

4531 VILLAGE WOOD DR.

Suite, Apt. #, Etc.

000003230190-5

-05/01/00--01006--010

******900.00 ****900.00**

City

ORLANDO

State

FL

Zip Code

32835

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

John W. Hickey

REGISTERED AGENT MUST SIGN

Date **4-13-00**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P.T.S.	JOHN W. HICKEY	4531 VILLAGE WOOD DR.	ORLANDO, FL. 32835
✓	NANCY J. HICKEY	4531 VILLAGE WOOD DR.	ORLANDO, FL. 32835

10. 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:

John W. Hickey **JOHN W. HICKEY**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-00

Date

407-492-4742

Daytime Phone #