

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

97 FEB 19 PM 12:58

DOCUMENT # **P95 0000 56143**

1. Corporation Name

ART DECOR OF NAPLES, INC.

1996-1997 ANNUAL REPORT

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

**6210 TRAIL BLVD. N. (SAME)
NAPLES, FLORIDA 34108**

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

SAME AS ABOVE

4. Date Incorporated or Qualified
To Do Business in Florida

7/12/95

Suite, Apt. #, etc

Suite, Apt. #, etc

5. FEI Number

65-0599932

Applied For

Not Applicable

City & State

City & State

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	ANN J. EVERS	200 QUAIL FOREST BLVD #109	NAPLES, FL 34105

400002093204--8
-02/20/97--01054--007
******365.00 ****365.00**

8. Name and Address of Current Registered Agent

James H. Siesty
1000 Tamiami Trail N.
Suite 201
Naples, FL 34102

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

James H. Siesty

REGISTERED AGENT MUST SIGN

Date

2/18/97

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:

Ann J. Evers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/97

Date

941-514-0644

Daytime Phone #

CR2E040 (12/96)



6210 Trail Boulevard North ■ Peacock Court ■ Naples, Florida 33963
941.514.0644 ■ Fax 941.514.0646

pg. 2 of 2

Sandra B. Mortham
Secretary of State
Division of Corporations

February 17, 1997

I am writing this letter to explain to you that I did not receive a renewal form last year for Art Decor of Naples, Inc. I learned of this problem when applying for a Line of Credit at my bank. Neither myself or my attorney, James H. Siesky received any notification from Tallahassee. It seems the address which appears on my Corporate application is neither my home address, my business address, or my attorneys.

I was totally unaware that I needed to file an annual report. I am enclosing a check to take care of this matter promptly and I am requesting that the reinstatement fee be waived.

Thank you for your attention to this matter. I am doing the best I can to resolve this problem. Please advise me if I need to do more.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Ann J. Evers'.

Ann J. Evers
President
Art Decor of Naples, Inc.