

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000059127

1. Corporation Name  
Arnold's Roofing Enterprises, Inc.

Principal Place of Business

Mailing Address

8057 TALLEY ANN DRIVE (same)  
TALLAHASSEE, FL 32311

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

APPROVED  
AND  
FILED

99 OCT 26 AM 9:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT

4. Date Incorporated or Qualified  
To Do Business in Florida

08/01/95

SP

5. FEI Number

59-3291015

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$6.75 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
PS	Terry Arnold SR.	8057 TALLEY ANN DRIVE	TALL, FL 32311
T	TAMMY ARNOLD	8057 TALLEY ANN DRIVE	TALL, FL 32311
D	Andre Arnold SR.	8051 Goodwin Drive	TALL, FL 32311
D	Josephus Gardner	Rt. 17 Box 1328	TALL, FL 32308
			400003026514--0 -10/27/99--01073--005 ****173.75 ****173.75

8. Name and Address of Current Registered Agent

Tammy Arnold  
8057 Talley Ann Drive  
TALL, FL 32311

9. Name and Address of New Registered Agent

Name  
400003026514--0  
-10/27/99--01073--006  
Street Address (P.O. Box Number is Not Allowed)  
\*\*\*\*173.75 \*\*\*\*173.75  
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

Tammy H. Arnold  
REGISTERED AGENT MUST SIGN

Date

10/26/99

11. This corporation owes 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Tammy H. Arnold

Date

Daytime Phone #

10/26/99 (850) 656-0555

CR2001 (1/99)