

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 NOV -3 PM 1:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000092839

1. Corporation Name

HARTLE'S CONCRETE SERVICE, INC.

Principal Place of Business

10404 TASSEL STREET
SPRING HILL FL 34608

Mailing Address

10404 TASSEL STREET
SPRING HILL FL 34608



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

5008 W. LINBAUGH AVE
Suite, Apt. #, etc.

SUITE 28

City & State

TAMPA FL

Zip

33624

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

12/04/1995

5. FEI Number

59-3342713

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PS	HARTLE, LISA M	10404 TASSEL STREET	SPRING HILL FL 34608
			400002340864-0
			11/06/97-01115-009
			****750.00 ****750.00

REINSTATEMENT (97)

A. Alan
11/3/97

8. Name and Address of Current Registered Agent

HARTLE, LISA M
10404 TASSEL STREET
SPRING HILL FL 34608

9. Name and Address of New Registered Agent

Name

LISA M. HARTLE

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

7378 Lemel OR

Suite, Apt. #, Etc.

City

SPRING HILL

State

FL

Zip Code

34607

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

Lisa M. Hartle

REGISTERED AGENT MUST SIGN

Date

10/30/97

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:

Lisa M. Hartle LISA M. HARTLE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/30/97 (83) 939-4010
Date Daytime Phone #

CR2E040 (8/97)