

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

DOCUMENT # PA0000001948

1. Corporation Name

Christopher Root Ltd., Inc.

98 JUN 16 AM 10:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

11646 US Hwy One
N. Palm Bch, FL 33408

Mailing Address

11646 US Hwy One
N. Palm Bch, FL 33408

REINSTATEMENT 91-98

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

2. New Principal Office Address, If Applicable
929 August Pointe Dr.

3. New Mailing Office Address, If Applicable
929 August Pointe Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Palm Beach Gardens, FL

City & State

Palm Beach Gardens, FL

Zip

33418

Country

USA

Zip

33418

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

2/14/96

5. FEI Number

65-0540640

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D, P, VP S, T	Christopher D.B. Root	929 August Pointe Drive	Palm Beach Gardens, FL 33418
			500002570005--0 -06/23/98--01086--014 ****908.75 ****908.75

8. Name and Address of Current Registered Agent

Christopher D.B. Root
11646 U.S. Highway One
North Palm Beach, FL 33408

9. Name and Address of New Registered Agent

Name
Charles Ryan Hickman, Esquire
Street Address (P.O. Box Number is Not Acceptable)
230 Royal Palm Way
Suite, Apt. #, Etc.
Suite 300
City
Palm Beach
State
FL
Zip Code
33480

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

Charles Ryan Hickman

REGISTERED AGENT MUST SIGN

Date 6/15/98

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:

Christopher D.B. Root
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR President

6/15/98

Date

Daytime Phone #