

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
J. B. M...  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000015651

1. Corporation Name

THE OTHER PLACE RFD, INC.

Principal Place of Business

Mailing Address

124 EAST MERRITT ISLAND CAUSEWAY  
MERRITT ISLAND FL 32952

1785 RANDALL AVENUE  
MERRITT ISLAND FL 32937

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

4. Date Incorporated or Qualified  
To Do Business in Florida

02/20/1996

5. FEI Number

59-3359640

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
DP	DAUGHERTY, SHAWN	815 NEW HAMPTON WAY	MERRITT ISLAND FL
DV	WUNZ, STEPHEN	470 MONITOR ST	MERRITT ISLAND FL
<del>DST</del>	<del>ROWOE, JAMES</del>	<del>390 DIANA BLVD</del>	<del>MERRITT ISLAND FL</del>
DST	claver Josh	3655 Detroit St.	Cocoa Carrabelle Groves FL 32926
			300002699363-1
			12/01/98 01079 010
			****150.00 ****150.00

8. Name and Address of Current Registered Agent

WUNZ, STEPHEN  
470 MONITOR ST  
MERRITT ISLAND FL 32952

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

*[Signature]*  
**SIGNATURE REQUIRED**  
REGISTERED AGENT MUST SIGN

Date

11/16/98

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:

*[Signature]*  
**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/16/98

Daytime Phone #

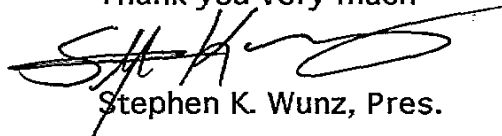
(407) 454-4401

CR2E040 (8/98)

To: State department of corporate reinstatement  
From: The Other Place RFD Inc.  
Re: Document #P96000015651

The first and only notice that I have received was the notice of Administrative Disolvment. I received this on Nov. 14th. This notice was mailed to the wrong address. I believe all other notices regarding my annual report were also mailed to the wrong address. The mailing address that is listed on this notice is 1785 Randall Ave. Merritt Island Fl. 32937. This is the address of one of the old partners. Please send all correspondence to the principle place of business at 124 E. Merritt Island Cswy. Merritt Island Fl. 32952.

Thank you very much

A handwritten signature in black ink, appearing to read 'S. K. Wunz', is written over the typed name. The signature is fluid and cursive.

Stephen K. Wunz, Pres.