

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 OCT 20 PM 12:36

DOCUMENT # P96 0000 210 32

1. Corporation Name

Guthrie Stucco & Co., Inc.

Principal Place of Business

Mailing Address

Route 2 Box 1828  
Palatka, FL 32177

Route 2 Box 1828  
Palatka, FL 32177

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

03/04/1996

5. FEI Number

59-3349762

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
D	Guthrie, Doyle J	Rt 2 Box 1828	Palatka, FL 32177
D	Guthrie, Joyce	Rt 2 Box 1828	Palatka, FL 32177
			500003027065--1 -10/27/99--01098--018 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Williams, Brenda J  
6683 Crill Avenue  
Palatka, FL 32177

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

Date

REGISTERED AGENT MUST SIGN

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

10/18/99

Date

(904) 328-2293

Daytime Phone #

Trim Bookkeeping & Tax Service Inc.  
6683 Crill Avenue  
Palatka, FL 32177  
Ph (904) 328-4164  
Fax (904) 325-0804

10/15/1999

Re: Guthrie Stucco & Co., Inc.  
Rt 2 Box 1828  
Palatka, FL 32177

Doc # P96000021032

To Whom It May Concern,

My client received a notice of administrative dissolution or revocation for their corporation, which I feel is incorrect. The form and check #1535 were postmarked April 29, 1999 so the form was filed timely and the fee was paid. However the check has still not cleared the bank so we are sending in the reinstatement form with another check for \$150.00 and ask that you please waive the penalty since the original form was filed timely. I thank you so much for your time and if you have any questions please do not hesitate to call me at the number above.

Sincerely,

*Leah M. Smith*

Leah M. Smith  
Accountant