

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 NOV 13 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000023718**

1. Corporation Name

Grumpy's Cigar Pub, Inc.

Principal Place of Business

Mailing Address

**9 Stone Street
Cocoa, FL 32922**

REINSTATEMENT

97-98

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

2. New Principal Office Address, If Applicable

9 Stone St.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Cocoa, FL

City & State

Zip

32922

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

3/12/96

5. FEI Number

59-3365547

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
Pres.	Lori Pierce	4415 Hartville Av.	Cocoa, FL 32926
V.P.	Catherine A. Parsons	4310 Peppertree St.	Cocoa, FL 32926
Sec.	Donald Pierce	4415 Hartville Av.	Cocoa, FL 32926
Treas.	Matthew B. Parsons	4310 Peppertree St.	Cocoa, FL 32926

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*****900.00 ***900.00**

8. Name and Address of Current Registered Agent

**Mark P. Young
104 River Heights Drive
Cocoa, FL 32922**

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

same

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

Mark P. Young
REGISTERED AGENT MUST SIGN

Date **11/13/98**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark P. Young

Mark P. Young 11/13/98 (407) 544-1234
Date Daytime Phone #

CR2E040 (1/98)