

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 DEC 10 AM 11:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PA10000027748
1. Corporation Name Alligator Temps of Ruskin, Inc.

Principal Place of Business 4910 US Hwy 41S.
Sun City, FL 33586

Mailing Address PO Box 7357
Sun City, FL 33586

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

2. New Principal Office Address, If Applicable 4910 US Hwy 41S.
Suite, Apt. #, etc.
City & State Sun City FL
Zip 33586 Country USA

3. New Mailing Office Address, If Applicable PO Box 7357
Suite, Apt. #, etc.
City & State Sun City FL
Zip 33586 Country USA

REINSTATEMENT

4. Date Incorporated or Qualified To Do Business in Florida 4-9-96

5. FEI Number 59-336987 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	RANDALL ELLISON	4910 Hwy 41 SUN CITY FL	SUN CITY FL 33586
V.P.	MARTY MARRA	13009 ST. FILADELPHIA DR	RIVERVIEW FL 33569
			600002711816--9
			-12/14/98-01106-005
			****300.00 ****300.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name GEORGE J. LAMOUR
Street Address (P.O. Box Number is Not Acceptable) 5811 MEMORIAL HWY
Suite, Apt. #, Etc. 207
City TAMPA State FL Zip Code 33615

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 George J. Lamour Date 12/8/98
REGISTERED AGENT MUST SIGN

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: Randall B Ellison Date 12/8/98 Daytime Phone # 813-641-9846
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RANDALL ELLISON