

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

97 NOV 10 AM 11:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000053855**

1. Corporation Name

LOIS JEAN LANG, INC.

Principal Place of Business

~~2310 NEBRASKA AVE~~
~~PALM HARBOR FL 34683~~

Mailing Address

~~2310 NEBRASKA AVE~~
~~PALM HARBOR FL 34683~~

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

2. New Principal Office Address, If Applicable

~~2515 Countryside Blvd~~
~~Suite, Apt. #, etc.~~
~~Suite B~~

City & State

~~Clearwater, FL~~
Zip ~~33763~~ Country ~~USA~~

3. New Mailing Office Address, If Applicable

~~2515 Countryside Blvd.~~
~~Suite, Apt. #, etc.~~
~~Suite B~~

City & State

~~Clearwater, FL~~
Zip ~~33763~~ Country ~~USA~~

4. Date Incorporated or Qualified
To Do Business in Florida

06/24/1996

5. FEI Number

59-3392119

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
PSD	LANG, LOIS J	2310 NEBRASKA AVE 2515 Countryside Blvd. Suite B	PALM HARBOR FL 34683 Clearwater, FL 33763

500002345245-6
-11/12/97-01105-021
****750.00 ****750.00

8. Name and Address of Current Registered Agent

MACK, RAYMOND P
2515 COUNTRYSIDE BLVD, SUITE B
CLEARWATER FL 34623

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

33763

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

Raymond P Mack
REGISTERED AGENT MUST SIGN

Date

11/7/97

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)(l), 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:

Lois Jean Lang
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-30-97
Date

813-709-6185
Daytime Phone #

CR2E040 (8/97)