

**APPLICATION
FOR
REINSTATEMENT**



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

DOCUMENT # 996000057924

1. Corporation Name

LIMESTONE-SHORES EARLY LEARNING CENTER, INC.

Principal Place of Business

Mailing Address

6769 Church Street
Jupiter, FL 33456

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

33314

USA

4. Date Incorporated or Qualified
To Do Business in Florida

7/10/96

5. FEI Number

65-0682136

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

St 73 Applicable 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
P/S _D	David Levy	4750 Oakes Road, Ste M	Davie, FL 33314
V-P	Arnaldo Jagle	4750 Oakes Road, Ste M	Davie, FL 33314

700002729287--2

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Roger C. Hurd
8295 N. Military Trail, Ste. A
Palm Beach Gardens, FL 33410

Name
Timothy H. Kenney, Esq.
Street Address (P.O. Box Number is Not Acceptable)
189 Bradley Place
Suite, Apt. #, Etc.
City
Palm Beach
State
FL
Zip Code
33480

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

TIMOTHY H. KENNEY REGISTERED AGENT MUST SIGN

Date 12/31/98

1. 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.)

2. 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

12/31/98

254-531-5445

Date

Daytime Phone #

00

FILED

99 JAN -4 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

98-99



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 086158 7173229

AUTHORIZATION :

Patricia Piguet

COST LIMIT : ~~\$ 150.00~~ PPD \$ 900.00

ORDER DATE : January 4, 1999

ORDER TIME : 10:29 AM

ORDER NO. : 086158-005

CUSTOMER NO: 7173229

CUSTOMER: David Levy, Corp Spec.
Limestone-shores Early
6769 Church Street

Jupiter, FL 33456

ANNUAL REPORT FILING

NAME: LIMESTONE-SHORES EARLY
LEARNING CENTER, INC.

XX ANNUAL REPORT/REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea

EXAMINER'S INITIALS:

B 1/4/99