

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P 960000 70813

1. Corporation Name

FLORIDA POOL & DUCK SURFACING, INC.

Principal Place of Business

Mailing Address

P.O. Box 2267  
BOCA RATON FL  
33427

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

22912 GREENVIEW TERRACE  
Suite, Apt. #, etc.

PMB 364  
7040 W. PALMETTO PK. RD. #4

City & State  
BOCA RATON FL

City & State  
BOCA RATON, FL

Zip  
33433

Country  
USA

Zip  
33433

Country  
USA

4. Date Incorporated or Qualified  
To Do Business in Florida

AUG. 26, 1996

5. FEI Number

65-0724098

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

REINSTATEMENT 98-99

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.	ROBERT S. DeVos	22912 GREENVIEW TERRACE	BOCA RATON FL 33433
TREAS.	KARON M. DeVos	22912 GREENVIEW TERRACE	BOCA RATON FL 33433
			600003027126--0 -10/27/99-01107-001 ****\$900.00 ****\$900.00
			10/14/99

8. Name and Address of Current Registered Agent

CLIFF NEWELL  
708 DIXIE LANE  
WEST PALM BEACH, FL  
33415

9. Name and Address of New Registered Agent

Name  
ROBERT S. DeVos  
Street Address (P.O. Box Number Is Not Acceptable)  
22912 GREENVIEW TERRACE  
Suite, Apt. #, Etc.  
City  
BOCA RATON  
State  
FL  
Zip Code  
33433

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

*Robert S. DeVos*

REGISTERED AGENT MUST SIGN

Date 10/14/99

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

*Robert S. DeVos*

ROBERT S. DeVos  
PRESIDENT

10/14/99

Date

954-214

2790

Daytime Phone #

CR2001 (12/98)