

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

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

DOCUMENT # P96000071270

1. Corporation Name

EIDEE PROPERTY INSPECTIONS, INC.

Principal Place of Business

531 US 41 BYPASS NORTH #113  
VENICE FL 34292

Mailing Address

531 US 41 BYPASS NORTH #113  
VENICE FL 34292

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

08/27/1996

5. FEI Number

#65-0690629

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
D	WANK, EILEEN A	1400 TARPON CENTER DRIVE UNIT 21 531 US 41 BYPASS NORTH SUITE 113	VENICE FL 34285 Venice FL 34292
D	GANDER, DANIEL D	1400 TARPON CENTER DRIVE UNIT 21	VENICE FL 34285

100002345351-6  
-11/12/97-0111-012  
\*\*\*\*165.00 \*\*\*\*165.00  
JOS  
11-10-97

8. Name and Address of Current Registered Agent

MACRIS, STEVEN W  
609 SOUTH TAMiami TRAIL  
VENICE FL 34285

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

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

REGISTERED AGENT MUST SIGN

Date

11/5/97

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)(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

Date

Daytime Phone #

EILEEN A. WANK 11/3/97 941 484-9969

FILED

97 NOV -7 AM 10:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



(2)

**Eidee Property Inspections, Inc.  
531 US 41 Bypass North Suite 113  
Venice, FL 34292**

Florida Dept of State  
Dept. of Corporations  
P. O. Box 6327  
Tallahassee, Fl 32314-6327

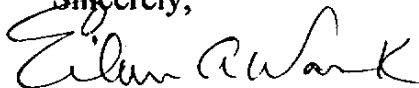
Re:P96000071270

Gentlemen:

Per our telephone conversation of earlier today regarding my revocation notice, please be advised that I did not receive any forms from you earlier and therefore was not aware of the need to file said annual report.

I am enclosing \$165.00 as per your instructions and my signature below affirming that the afore mentioned statement is true.

Sincerely,



Eileen Wank  
President