

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**APPLICATION
FOR
REINSTATEMENT**



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

REMOVED
AND
FILED

1997 DEC 17 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000080436

1. Corporation Name

MOLE HEAD CONSTRUCTION AND BORING, INC.

Principal Place of Business

Mailing Address

POST OFFICE BOX 1084
303 EAST MOODY BOULEVARD
BUNNELL FL 32110

~~POST OFFICE BOX 1084~~
~~303 EAST MOODY BOULEVARD~~
~~BUNNELL FL 32110~~

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

P.O. Box 354684
Palm Coast FL
32135 Flagler

4. Date Incorporated or Qualified
To Do Business in Florida

09/27/1996

5. FEI Number

59-3404013

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	ROMERO, PAT	303 E MOODY BLVD	BUNNELL FL 32110
D	HORTON, CHRIS	303 E MOODY BLVD	BUNNELL FL 32110

8000002376918--7
-12/18/97--01100--008
******165.00 ****165.00**

12/2/97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ROMERO, PAT
303 EAST MOODY BOULEVARD
BUNNELL FL 32110

Name

Chris Horton

Street Address (P.O. Box Number is Not Acceptable)

26 Woodworth Drive

Suite, Apt. #, Etc.

City

Palm Coast

State

FL

Zip Code

32164

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

12/2/97

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

[Signature]

12/2/97

(904) 446-8877

Date

Daytime Phone #

CR2E040 (8/97)



Stacy Prather
Document Specialist
P.O. Box 6327
Tallahassee, FL 32314

Dear Ms. Prather,

Per our conversation today (December 15) , I am writing to you to inform you that I had spoken with Shawn from your office regarding the reinstatement fee for failure to provide our corporate annual report to the Florida Department of State. Due to an address change, we did not receive or even know to expect a request for an annual report.

Our ignorance, coupled with not receiving the letter of dissolution until late November, prompted my call to Shawn. Shawn requested we send \$165.00 and a letter of explanation which, in my joy of not having to pay the \$585.00 fine, I forgot. Thank you for all of your help and assistance in this process.

RE: Letter Number 597A00057998, Ref. Number P96000080436

Sincerely,

Christopher S. Horton