

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
97-98 Sandra B. Mortham  
AIP Secretary of State  
DIVISION OF CORPORATIONS

FILED

98 AUG 31 PM 1:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 096000104390

1. Corporation Name

SELECT MATERIALS, INC.

Principal Place of Business

Mailing Address

(OFFICE)  
18000 LK. HATCHINEHA RD. P.O. Box 334  
HAINES CITY, FL 33844 LAKE HAMILTON FL  
33851

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

2. New Principal Office Address, If Applicable

715 ORANGE ST

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

P.O. Box 334

Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

12-24-96

5. FEI Number

59-3415522

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
P/D	DONALD D. Roberts	8000 LK. HATCHINEHA RD.	HAINES CITY, FL 33844
SIT/V/D	JO ANN ROBERTS	8000 LK HATCHINEHA RD.	HAINES CITY, FL 33844

600002635626  
09/09/98 01070-010-5  
\*\*\*\*315.00 \*\*\*\*315.00

SL  
9-1-98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

JO ANN ROBERTS  
8000 LK. HATCHINEHA RD  
HAINES CITY, FL 33844

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

JO ANN ROBERTS

REGISTERED AGENT MUST SIGN

Date

8/24/98

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)(j), 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:

JO ANN ROBERTS

Date

8/24/98

Daytime Phone #

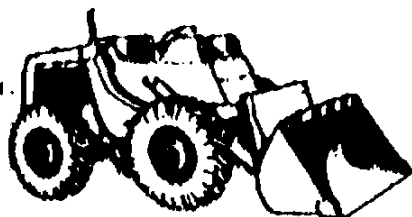
941  
967-0011

CR-2040 (1/98)

(2)

# SELECT MATERIALS, INC.

FILL DIRT & CLAY



August 24, 1998

Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Dear Secretary of State,

Please find enclosed the check in the amount of \$315.00 (\$165 for 1997 and \$150.00 for 1998) for reinstatement as requested per our previous phone conversation. The attorney who filed the original incorporation documents used the physical address as both physical and mailing. Since no mail can be received at the address given, I never received the corporate renewal notices.

Sincerely,

*Jo Ann Roberts*  
Jo Ann Roberts