

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

01 NOV -2 PM 6:05

DOCUMENT # P97000012083

1. Corporation Name

FLORIDA LANDSCAPE ENTERPRISES, INC.

Principal Place of Business

Mailing Address

3042 N EISENHOWER AVE.  
HERNANDO FL 34442

N EISENHOUSE AVE  
3042  
HERNADO FL 34442

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

5. FEI Number

59-3499770

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
CD	ROBINSON, JOYCE	3042 N EISENHOWER AVE.	HERNANDO FL 34442
PD	BANTON, GILBERT	3042 N EISENHOWER AVE.	HERNANDO FL 34442
VPD	BANTON, WAYNE N	3042 N EISENHOWER AVE.	HERNANDO FL 34442

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BANTON, WAYNE N  
3042 NORTH EISENHOWER AVENUE  
HERNANDO FL 34442

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.

AD

Signature of  
Registered Agent

Wayne N. Banton

REGISTERED AGENT MUST SIGN

Date

10/31/01

11. 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:

Wayne N. Banton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/31/01 (352) 726-9481

Daytime Phone #