

INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED  
AND  
FILED

98 DEC 31 PM 4:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPLICANT  
FOR  
REINSTATEMENT

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

DOCUMENT #

P97000015255

1. Corporation Name

Prestige Window & Door, Inc.

Principal Place of Business

Mailing Address

~~6516~~ <sup>6502</sup> S. 78th Street  
Riverview, FL 33569

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

2. New Principal Office Address, If Applicable

6516 S. 78th Street

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

6516 S. 78th St.

Suite, Apt. #, etc.

City & State

Riverview, FL 33569

City & State

Riverview, FL 33569

Zip

Country

Zip

Country

4. Date Incorporated or Qualified

To Do Business in Florida

MARCH 1997

5. FEI Number

59-3431401

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	Edward Johns	<del>6516</del> <sup>6502</sup> S. 78th St.	Riverview, FL 33569
VP	Thomas Johns	<del>6516</del> <sup>6502</sup> S. 78th St.	Riverview, FL 33569
S&T	Larry W. Stephens	<del>6516</del> <sup>6502</sup> S. 78th St.	Riverview, FL 33569
			600002720148-8 -01/05/98-01033-016 ***750.00 ***750.00
			\$8.12/3

8. Name and Address of Current Registered Agent

Paul T. Marks

15511 N. Florida Ave.  
Tampa, FL 33613

9. Name and Address of New Registered Agent

Name

Edward Johns

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

~~6516~~ <sup>6502</sup> S. 78th Street

Suite, Apt. #, Etc.

City

Riverview, FL

State

FL

Zip Code

33569

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

*Edward Johns*

REGISTERED AGENT MUST SIGN

Date 12-28-98

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)(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

*Edward Johns*

EDWARD JOHNS, PRES.

12-28-98

813-671-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2000 (1/98)