

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

AND
FILED

98 DEC 21 AM 9:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

DOCUMENT # P97000016289

1. Corporation Name

Florida Harvesting, Inc.

Principal Place of Business

Wauchula, Fl.

Mailing Address

P.O. Box 605
Wauchula, Fl.

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

2. New Principal Office Address, If Applicable

P.O. Box 605

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

P.O. Box 605

Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida

March 20, 1997

5. FEI Number

65-0752248

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	James A. Boyette	304 Garden Drive	Wauchula, Fl. 33873

300002720543-1
-12/23/98-01038-012
****150.00 ****150.00

8. Name and Address of Current Registered Agent

James A. Boyette
P.O. Box 605
Wauchula, Fl. 33873

9. Name and Address of New Registered Agent

Name James A. Boyette
Street Address (P.O. Box Number is Not Acceptable)
304 GARDEN DRIVE
Suite, Apt. #, Etc.

City Wauchula

State FL Zip Code 33873

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

James A. Boyette
REGISTERED AGENT MUST SIGN

Date 11-30-98

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:

James A. Boyette
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-30-98 941 7732406
Date Daytime Phone #

CR2ED40 (1/98)

(2)

**Hackney
Manley &
Company, LLP**

CERTIFIED PUBLIC ACCOUNTANTS

203 South Seventh Avenue
Wauchula, Florida 33873
941-773-6768 FAX 941-773-4578

Monday, December 07, 1998

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Florida Harvesting, Inc.
P.O. Box 605
Wauchula, FL 33873
EIN# 65-0752248
Document # P97000016289

Gentlemen,

In a phone conversation with an agent in your office on this date, it was explained that the corporation renewal papers and notices of cancellation for Florida Harvesting, Inc. were never received because there is no mail receptacle at the street address listed, (304 Garden Drive). The agent stated that the late filing fee of \$600.00 would be waived this time, due to the renewal and cancellations not being received.

This letter is to inform you of this action as well as to express appreciation for this consideration. Enclosed please find a payment of \$150.00 for the renewal of Florida Harvesting, Inc. for 1998.

Again, Thank You

Hackney & Manley & Company, LLP