

APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSFILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # P97000018786

1. Corporation Name

HODGES CAR WASH, INC.

Principal Place of Business

Mailing Address

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

2. New Principal Office Address, If Applicable

7995 Sarcee Trail

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

7995 Sarcee Trail

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

2/24/97

5. FEI Number

5903429228

Applied For

Not Applicable

City & State

Jacksonville, FL

City & State

Jacksonville, FL

Zip

32244

Country

Duval

Zip

32244

Country

Duval

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PSTD	David W. Taylor	7995 Sarcee Trail	Jacksonville, FL 32244

100003534061--0
-01/12/01--01008--004
****450.00 ****450.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

David W. Taylor

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

7995 Sarcee Trail

Suite, Apt. #, Etc.

City

Jacksonville

State

FL

Zip Code

32244

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

David W. Taylor

REGISTERED AGENT MUST SIGN

Date

12/20/00

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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.

AD

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David W. Taylor

David W. Taylor

Date

12/20/00

Daytime Phone #

904 771 9521



✓ *Income Tax Service*
✓ *Financial & Insurance Services*
✓ *Accounting & Bookkeeping Services*

320 Osceola Avenue
Jacksonville Beach, FL 32250
Phone 904/241-2533
Fax: 904/241-1604
www.triplechecktax.com

December 29, 2000

Division of Corporations
Annual Reports Filing
Post Office Box 6327
Tallahassee, FL 32314

Re: Profit Corporation Annual Report
Document P97000018786 – Hodges Car Wash, Inc.

Dear Sir/Madam,

Please see the attached Application for Reinstatement for our client listed above. We are requesting that you accept their Application and their payment of \$450.00, for the years of 1998, 1999 and 2000.

Mr. Taylor, President of the above Corporation, did not receive the reports for the above registration period. Mr. Taylor has always been very conscientious about forwarding all government paperwork to us and paying all fees due.

Thank you for your help and consideration with this matter. Please contact me if you have any questions/concerns regarding this matter.

Sincerely,


Beverlee A. Flowers, E.A.

Enclosure: Check #1007
Application For Reinstatement