

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

102

FILED

04 NOV 12 AM 11:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000027817

**1. Corporation Name**

NORTH FLORIDA TIRE & ROAD SERVICE, INC.

**2. Principal Office Address**

2109 US Highway 90 West

Suite, Apt. #, etc.

170-310

City & State

Lake City, FL

Zip

32055

Country

USA

**3. Mailing Office Address**

2109 US Highway 90 West

Suite, Apt. #, etc.

170-310

City & State

Lake City FL

Zip

32055

Country

US

**REINSTATEMENT**

03-04

**4. Date Incorporated or Qualified  
To Do Business in Florida**

3/24/1997

**5. FEI Number**

59-3435695

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

Margaret G. Fuller

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

2109 US Highway 90 West

Suite, Apt. #, Etc.

170-310

City

LAKE CITY

State

FL

Zip Code

32055

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of  
Registered Agent

Margaret G. Fuller

REGISTERED AGENT MUST SIGN

Date 11-10-04

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
STO	Jeffrey L Fuller	2109 US Highway 90 West	Lake City, FL 32055
PO	Margaret G Fuller	2109 US Highway 90 West	Lake City, FL 32055

100042635921  
11/12/04--01056--019 \*\*300.00

**10. 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: Margaret G Fuller, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-10-04

Date

Daytime Phone #

CR2E081 (01/04)

# TaxPlusSolutions Inc.

www.taxplussolutions.com

November 10, 2004

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

Re: North Florida Tire & Road  
Service, Inc.  
Corporate Reinstatement  
59-3435695

Gentlemen:

We have just learned that this corporation was administratively dissolved for failure to file annual report. Lake City went to a new 911 addressing system and the notice for filing the annual report was never received.

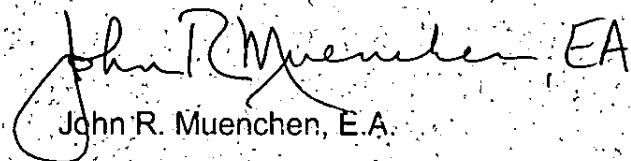
Please be advised that the late filing was due to a reasonable cause, and accordingly, the penalties that were imposed should be abated.

Enclosed you will find the completed Corporation Reinstatement form along with a check for \$300.00.

They have acted in good faith and their failure to file the return timely was not a willful neglect.

Thank you for your prompt attention to this request. If you require further clarification of any point, I may be reached at (386)755-0877.

Very truly yours,

  
John R. Muenchen, E.A.

JRM/db  
Enc.