

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

AND  
FILED

99 JAN -4 PM 3: 30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P97000032368

1. Corporation Name

BELLENDORF ENTERPRISES, INCORPORATED

Principal Place of Business

Mailing Address

476 EAST LAKE DRIVE  
LARGO FL 33771

476 EAST LAKE DRIVE  
LARGO FL 33771

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

4. Date Incorporated or Qualified  
To Do Business in Florida

04/09/1997

5. FEI Number

62-139692-4

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
D	BELLENDORF, KEVIN K	476 EAST LAKE DRIVE	LARGO FL 33771

200002735502--1  
-01/08/99--01113--007  
\*\*\*\*168.00 \*\*\*\*168.00

12/1/98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KERSKER, PETER W ESQ.  
1 BEACH DRIVE, SE  
SUITE 201  
ST. PETERSBURG FL 33701

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

*[Signature]*  
REGISTERED AGENT MUST SIGN

Date

12/30/98

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)(f), 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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12/30/98 727-466-0006

CR2E040 (9/98)

To whom handles my Account.

12/30/98

I'm SORRY About the lateness of my Application. I'm a new bussiness owner and didnt realize I had to file every year. I called the Dept. of State office and they told me to write this letter explaining my tardiness. And send \$150. If this information isn't correct please contact me AT A.S.A.P.

Home (727) 536-5214  
work (727) 466-0106

All information is still the same. Thank you for your help

Kevin Bellandoy