

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAR -5 PM, 2:21

DOCUMENT # **P97000042264**

1. Corporation Name

CARPETS OF MARY ESTHER, INC.
130 MIRACLE STRIP PARKWAY,
SUITE A
MARY ESTHER, FL 32569-0111

2. Principal Office Address

130 Miracle Strip Pkwy.
Suite, Apt. #, etc.
Suite A

3. Mailing Office Address

SALE
Suite, Apt. #, etc.

City & State

Mary Esther

City & State

Florida

Zip
32569

Country
USA

Zip

Country

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

4/97

5. FEI Number

59-3456022

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

WAYNE B. WEEMS

200003819432--8

-03/08/01--01101--008

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

7047 Shellfish Court

****300.00 ****300.00

Suite, Apt. #, Etc.

City

Navarre

State
FL

Zip Code
32566

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

WAYNE B. WEEMS REGISTERED AGENT MUST SIGN

Date 2-27-01

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
Pres.	Charles Pippin	1100 Pippin Drive	Mary Esther, FL 32569
VP	Wayne Weems	7047 Shellfish Court	Navarre, FL 32566

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/00)

2 of 2



Carpets of Mary Esther
130 Miracle Strip Parkway
Suite A
Mary Esther, FL 32569-0011
(850) 243-3606
FAX (850) 243-9545

February 27, 2001

FLORIDA DEPARTMENT OF STATE
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

TO WHOM IT MAY CONCERN:

I am attaching application for Corporation Reinstatement and a fee for the amount of \$300.

We never received the original registration paperwork. Please accept our registration fee of \$300, and dissolve any and all penalties.

If you have any questions, please call me at 850-243-3606.

Sincerely,

CARPETS OF MARY ESTHER, INC.

WAYNE B. WEEMS
VICE PRESIDENT

WBW:mj
Encl: 2