

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

98 DEC -8 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000053802

1. Corporation Name

MAINLAND ENTERPRISES, INC.

Principal Place of Business

Mailing Address

1062 HARTLEY CT., UNIT 110
MARCO ISLAND FL 34145

P.O. BOX 2122
MARCO ISLAND FL 34146



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

2. New Principal Office Address, If Applicable

5880 Shirley St.
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

5880 Shirley St.
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

06/18/1997

5. FEI Number

001-65-0766487

Applied For

Not Applicable

City & State
Naples FL

City & State
Naples FL

Zip
34109 Country

Zip
34109 Country

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
1	2	3	4
Pres.	Matthew Fleming	5880 Shirley St Naples FL	34109
Sec.	Matthew Fleming	"	"
Treas.	Matthew Fleming	"	"

200002713372--5
-12/15/98--01083-012
****150.00 ****150.00

8. Name and Address of Current Registered Agent

FLEMING, MATTHEW
1062 HARTLEY CT., UNIT 110
MARCO ISLAND FL 34145

9. Name and Address of New Registered Agent

Name
Matthew Fleming
Street Address (P.O. Box Number is Not Acceptable)
5880 Shirley St
Suite, Apt. #, Etc.
City
Naples
State
FL
Zip Code
34109

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 REQUIRED
REGISTERED AGENT MUST SIGN

Date 11/18/98

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: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/18/98 941-596-1151
Date Daytime Phone #

CR2E040 (9/98)

20f2

MAINLAND INC.

5880 Shirley St., Naples FL 34109 Ph: 941-596-1151 Fax: 941-596-1152

November 18, 1998

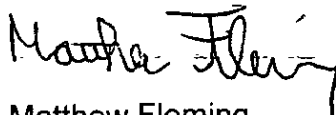
Division Of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee FL 32314

Good Day:

I have received a notice of reinstatement for Mainland Inc.. Due to my changing address's this is the first notice I have received. As you can notice on my application I have changed address's and the company at the former address does not forward mail on a regular basis.

I called your customer service dept. and the employee said pay \$150 and explain the situation in a letter. I would appreciate your understanding. if you have any questions please call me at 941-596-1151.

Sincerely



Matthew Fleming