

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 OCT 19 PM 12:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P97000059052**

1. Corporation Name

**Gardener's Environmental Landscape
Management, Inc.**

2. Principal Office Address

7901 SW 6th COURT

Suite, Apt. #, etc.

#150

City & State

PLANTATION, FL

Zip

33324

Country

USA

3. Mailing Office Address

7901 SW 6th COURT

Suite, Apt. #, etc.

#150

City & State

PLANTATION, FL

Zip

33324

Country

USA

REINSTATEMENT 03-04

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

5. FEI Number

65-0772131

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

Peter C. Gardner

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

8211 W. BROWARD BLVD

Suite, Apt. #, Etc.

#230

City

PLANTATION

State
FL

Zip Code

33324

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

Peter C. Gardner

Date

REGISTERED AGENT MUST SIGN

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
PD	Peter C. Gardner	8211 W. BROWARD BLVD #230	PLANTATION, FL 33324
S	Lucette L. Fitzgerald	2710 Coolidge St.	Hollywood, FL 33020
T	Carol Anderson	11503 SW 53 PL	COOPER CITY, FL 33330

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:

Peter C. Gardner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (07/04)