

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

Pg 1 of 2

APPLICATION
FOR
REINSTATEMENT



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

01 MAR 15 PM 4:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000076185

1. Corporation Name

RON WILLIS INSTALLATIONS, INC.

Principal Place of Business

Mailing Address

10858 SW 91ST AVE.
OCALA FL 34481

10858 SW 91ST AVE.
OCALA FL 34481



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

4. Date Incorporated or Qualified
To Do Business in Florida

09/03/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3468651

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

34481 U.S.

34481 U.S.

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DPST	WILLIS, RONALD	3540 W. HILLTOP LN.	DUNNELLON FL 34433
			200003891662--1 -03/22/01--01008--005 ****300.00 ****300.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

WILLIS, RONALD E
3540 W HILLTOP LN
DUNNELLON FL 34433

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Ronald E Willis

Date 3-12-01

REGISTERED AGENT MUST SIGN

11. 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:

Ronald E Willis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-01

Date

Daytime Phone #

CR2E040 (8/00)

RON WILLIS INSTALLATIONS, INC.
10857 SW 91ST AVE BLDG. E-12 UNIT B
OCALA, FL 34481
352-861-1730 OR 352-861-1731

Monday, March 12, 2001

TO: DIVISION OF CORPORATIONS
ANNUAL REPORT/REINSTATEMENTS SECTION

FROM: RON WILLIS INSTALLATION

TO WHOM THIS MAY CONCERN RON WILLIS INSTALLATIONS DID NOT RECIEVE ANY
OTHER LATE NOTICE FOR REINSTATEMENT FOR OUR CORPERATION AND WE ARE
ASKING TO REINSTATE WITHOUT LATE FEES. I AM SENDING A CHECK ENCLOSED
FOR \$300.00. WILL YOU PLEASE REINSTATE, IF YOU HAVE ANY QUESTIONS PLEASE
CALL ME THANK YOU.

LEAH ANN RAMSEY
OFFICE MANAGER

Leah Ann Ramsey

P.S. There was an address
Change. So that is probalely
why we didn't Recieve
notice