

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 23 PM 12:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
REINSTATEMENT

DOCUMENT # P97000084046

1. Corporation Name

FLYING COLORS PAINTING, INC.

Principal Place of Business

Mailing Address

218 E. EAU GALLIE BLVD  
STE A PMB 91  
INDIAN HARBOR BCH FL 32937  
US

370 E. RIVERA BLVD  
INDIALANTIC FL 32903  
US

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

09/29/1997

5. FEI Number

65-0784845

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	JENNINGS, THOMAS M	370 E. RIVERA BLVD.	INDIALANTIC FL 32903
V	STRANEY, RICHARD	370 E. RIVERA BLVD.	INDIALANTIC FL 32903
T	HODGES, RITCHIE	89 NW IRWIN AVE	MELBOURNE FL 32904
S	JENNINGS, MARY ANN	370 E. RIVERA BLVD.	INDIALANTIC FL 32903

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

JENNINGS, THOMAS  
370 E. RIVERA BLVD  
INDIALATIC FL 32903

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. or 617.0505, F.S.

Signature of  
Registered Agent

*Thomas Jennings*  
REGISTERED AGENT MUST SIGN

Date

10/18/03

11. I certify that I am an officer or director of 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:

*Thomas Jennings*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/18/03 3217252805

CR20040 (7/03)

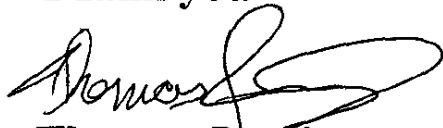
2013

**FLYING COLORS PAINTING INC.  
370 EAST RIVIERA BLVD  
INDIALANTIC, FL 32903  
321-725-2805**

**To Whom It May Concern:**

**Per our telephone conversation I am sending you this letter and the reason for not filing in a timely matter accompanied by payment of \$150.00. My company did not receive the two prior uniform business report notices. Upon receiving this notice I called and was instructed to send a letter stating this and payment.**

**Thank you**



**Thomas Jennings  
President**