

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

00 OCT 18 PM 3:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000087317

1. Corporation Name

TREASURES AND DOLLS, INC.

Principal Place of Business

Mailing Address

518 INDIAN ROCKS ROAD
BELLEAIR BLUFFS FL 33770

518 INDIAN ROCKS ROAD
BELLEAIR BLUFFS FL 33770



REINSTATEMENT

2000

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

10/09/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3475189

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	SHAW, MILTON F	518 INDIAN ROCKS ROAD	BELLEAIR BLUFFS FL 33770 <i>Deceased</i>
D	SHAW, MARILYN B	1460 GULF BLVD. #103	CLEARWATER FL 33767
D	SHAW, MILTON F JR.	1460 GULF BLVD. #805 907	CLEARWATER FL 33767
D	SHAW, Gayle L.	1460 Gulf Blvd. UNIT 907	Clearwater, FL 33767
D	SHAW, Christopher D.	138 th Overbrook St.	Large Fl 33770

8. Name and Address of Current Registered Agent

SHAW, MILTON F
518 INDIAN ROCKS ROAD
BELLEAIR BLUFFS FL 33770

9. Name and Address of New Registered Agent

Name MILTON F. SHAW JR
Street Address (P.O. Box Number is Not Acceptable)
518 Indian Rocks Road
Suite, Apt. #, Etc.
City Belleair Bluffs State FL Zip Code 33770

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 10-13-00

CR2E040 (8/00)

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MILTON F. SHAW JR

Date

Daytime Phone #

10-13-00 (727) 884-7277