

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

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

50 FEB -8 PM 12:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000091690

1. Corporation Name

COUNTRY DREAMS INCORPORATED

Principal Place of Business

Mailing Address

ROUTE 18, BOX 705
STATE ROAD 247
LAKE CITY FL 32025

ROUTE 18, BOX 705
STATE ROAD 247
LAKE CITY FL 32025



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

10/23/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59-3484397

Not Applicable

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	STE-MARIE, CARL	ROUTE 18, BOX 705	LAKE CITY FL 32025
D	STE-MARIE, NADIA LOUISE	1651 HARBOUR SIDE DRIVE	LAKE CITY FL 32025
D	STE-MARIE, CHANTAL M	ROUTE 18, BOX 635	LAKE CITY FL 32025

100002774201--3
-02/12/99--01071--014
****300.00 ****300.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

STE-MARIE, CHANTAL M
ROUTE 18, BOX 705
STATE ROAD 247
LAKE CITY FL 32025

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

Chantal Ste-Marie

Date

2/4/99

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☐ No ☐

Corporation Not in Business yet
(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:

Chantal Ste-Marie

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/99

Date

(904) 752-3339

Daytime Phone #

CR2040 (9/98)

202

Country Dreams Incorporated
RR 18 Box 705
Lake City, FL 32025

February 4, 1999

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

On this day I called the Reinstatement Office and spoke to Stacy. She was most helpful. I called inquiring about our corporation status. She informed me of the procedure needed to reinstate our corporation. Enclosed you will find the appropriate documents filled accompanied by a \$300 check as per requested by Stacy.

Stacy informed me that the notice for 1998 was returned to your office by the US Post Office. Furthermore, as I told her, Country Dreams Incorporated as not yet operated as a business either in Florida or anywhere else. We are hopeful that within a year we will be in business. If I have failed to complete the form or if you need additional information from me, you can contact me at (904) 752-3339 during regular business hours. Thank you for your time and consideration.

Sincerely,

Chantal Ste-Marie
Chantal Ste-Marie