

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

APPROVED
AND
FILED

98 DEC -8 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000103134

1. Corporation Name

TREEHOUSE ENTERPRISES INC.

Principal Place of Business

Mailing Address

422 MAGNOLIA AVENUE #6
PANAMA CITY FL 32401

422 MAGNOLIA AVENUE #6
PANAMA CITY FL 32401



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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/05/1997	
City & State		City & State		5. FEI Number	
Zip		Country		59-3485140	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	
				\$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
P	BELZ, MARTHA G	12601 STEEPLECHASE DRIVE	PANAMA CITY FL 32404
VP	BREAULT, CANDICE B	310 WEST 34TH COURT	PANAMA CITY FL 32405
S	BREAULT, REGINALD R	310 WEST 34TH COURT	PANAMA CITY FL 32405

300002713093--6
-12/15/98--01070--017
****150.00 ****150.00

12/11

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BELZ, MARTHA G 12601 STEEPLECHASE DRIVE PANAMA CITY FL 32404		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

Martha G. Belz
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 12-8-98

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

Yes ☒ No ☐

(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:

Martha G. Belz
SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

850
12-8-98 763-3023

CR2E040 (\$98)

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

December 8, 1998

Dear Ms. Woodward:

As we discussed on December 7, we did not receive a annual report notice for 1998 . Since this is our first corporation we really didn't look for anything, also we only incorporated 12/97 we are very new at this.

Thank you for your assistance in this matter.

Sincerely,

A handwritten signature in cursive script, appearing to read "Martha Belz".

Martha Belz
President Treehouse Enterprises Inc.