**APPLICATION** FGR





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SECRETARY OF STATE TALLAHASSEE, FLORIDA



P97000109151 DOCUMENT #

1. Corporation Name

SOUTHERN TURF NURSERIES, INC.

Principal Place of Business

Mailing Address PO BOX 2299

22193 HWY 59 S

STE E

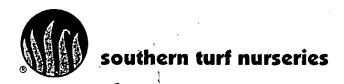
ROBERTSDALE AL 36567



ROBERTSDALE AL 36567		US			1 1981/1981 KE 181K 189K 89KK 88KK 88KK 188K 188K 188K				
If above addresses are incorrect in any way, line through incorrect information and enter correction below.									
			ng Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida				
28325 VARGO LN. 2832									
City & State City & State			<u>3 V 7</u> NTA .	, <del>, , , , , , , , , , , , , , , , , , </del>	· 	58-2362402 Applied For Not Applicable			
Zip 36530 Country Zip 365			30 Country 3		6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status				
	and Street Addresses of Each Officer and/o	or Director (Flo	rida nonprof	fit corporations must list at lea	ast 3 directors)				
Title(s) 1	Name of Officers and/or Directors			Street Address of Each Officer and/or Director		City / State / Zip			
-8	GRUENLOH, WAYNE A.	22193 HWY 59 SOUTH STEF			ROBERTSDALE AL 38567~				
Р	WOERNER, EDWARD E			BRUHN ROAD	ELBERTA AL 36530				
V	V McCERINE, WITTAM RAY			Summerfield Court	Foley, AL 36535				
				•		•			
					50	100036239 -02/02/0101 			
					٠				
8. Name and Address of Current Registered Agent					Name and Address of New Registered Agent				
KP&L SERVICES, INC. TEMPLERAL & Company  Street Address (P					1PLE TOP	s Not Acceptable)	1, P	<u>24</u>	
390 NORTH ORANGE AVENUE				540 ROYAL PAIM BEACH BLUD					
Suite, Apt. #, Etc.									
ORLANDO FL 32801				CityZOYAZ	KOYAL PALM DEACH   FL 3341/				
10. I, being Signature of Registered /	Agent	e named corpo	ties	Q Presiden	Digations of Section	on 607.0505, F.S. Date //24/	100		
this reins	that I am an officer or director or the receive statement application, the reason for dissol the corporation have been paid and the n	ution has been	eliminated.	the corporate name satisfies	the requirements	of section 607.0401 or 617.040	11 F.S	that all fees	

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.







TO:

Florida Department of State

FROM:

Greg Wood/Director of Human Resources

**SUBJECT:** 

Application for reinstatement

DATE:

October 17, 2000

Recently, Southern Turf Nurseries, Inc. received a form informing our office that our corporation had been dissolved for failure of submitting a "corporation annual report/uniform business report." This report was unexpected, as we had not received a first or second notice. We are submitting a check for \$150.00 with our "Application for Reinstatement" and requesting the Florida Department of State to waive penalties. Your help with this matter would be appreciated.



STN SPORTS AND ECOSHORES. Inc. ARE DIVISIONS OF southern turi nurseries

## **HEADQUARTERS:**

22193 HIGHWAY 59 SOUTH • SUITE F • P.O. BOX 2299 • ROBERTSDALE. ALABAMA 36567 (334) 947-9784 • (888) 316-TURF (8873) • FAX (334) 947-9785

## **FARM LOCATION:**

U.S. Highway 82 East • P.O. Box 230 • Brookfield, Georgia 31727 (912) 382-5655 • (800) 841-6413 • Fax (912) 382-5301 • www.southernturf.com

## ECOSHORES, Inc.

3869 SOUTH NOVA ROAD • PORT ORANGE, FLORIDA 32127 (904) 767-6232 • FAX (904) 756-9895 • E-Mail ecoshore@bellsouth.net