## PLEASE READ ALL INSTRUCTIONS BEFORE COMP

-APPLICATION FOR > REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretar of State

D'S/ISION OF CORPORATIONS

P98000021741 DOCUMENT #

1. Corporation Name

**#JILDERS REALTY CONSTRUCTION, INC.** 

Principal Place of Business

Mailing Address

492-MILE-POST-GOURT LAKE MARY FL 32746

Bill Green 497 Flora Creek Ct.

492 MILE POST COURT

LAKE MARY FL 32746

Lake Mary, FL 32746

MINDOLA

Name of Officers

If above addresses are incorrect in any way, line through incorrect information and enter correction below

3. New Mailing Office Address, If Applicable

Zip

Country

Secretary of State

~~~ 11U/A

03/09/1998

**FILED** 

Jan 03 2000 8:00 am



NSTATEMENT 10

Date Incorporated or Qualified To Do Business in Florida

5. FEI Number

Applied For Not Applicable

CERTIFICATE OF STATUS DESIRED 🗔

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) and/or Directors

Street Address of Each Officer and/or Director

City / State / Zip

**4<del>00003103894~-</del>** 01/20/00--01024--009 \*\*\*\*750.00 \*\*\*\*750.00

8. Name and Address of Current Registered Agent

Name

GREEN, WILLIAM B. **492 MILE POST COURT** LAKE MARY FL 32746

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State Zip Code

10. I, being appointed the registered agent of the above named proration, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

AGENT MUST SIGN REGISTERE

9. Name and Address of New Registered Agent

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.

