

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FLORIDA DEPARTMENT OF STATE

REINSTATEMENT



Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 17 AM 8:47

DOCUMENT # P98000075665

1. Corporation Name

JENSEN BEACH AUTOMOTIVE, INC.

Principal Place of Business

969 NE INDUSTRIAL BLVD.
JENSEN BEACH FL 34957

Mailing Address

969 NE INDUSTRIAL BLVD.
JENSEN BEACH FL 34957



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

08/27/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0860933

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	RYAN, TIMOTHY P	969 NE INDUSTRIAL BLVD.	JENSEN BEACH FL 34957

488884654434-8
-10/26/01--01023--017
****150.00 ****150.00

10/15/01

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RYAN, TIMOTHY P
969 NE INDUSTRIAL BLVD.
JENSEN BEACH FL 34957

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

Timothy P Ryan
REGISTERED AGENT MUST SIGN

Date

10-15-01

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:

Timothy P Ryan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

561-225-9286
10/15/01

CR2E040 (8/01)

**Jensen Beach Automotive
Timothy P. Ryan**

969 NE Industrial Blvd
Jensen Beach, FL 34957

Phone 561-225-9286
Fax 561-225-3337

October 15, 2001

RE: Document # P98000075665
FEI # 65-0860933

To Whom It May Concern,

I Timothy P. Ryan, owner/operator of Jensen Beach Automotive did not receive a uniform business report in January and July of this year. I received notice today of dissolution of corporation and called your office and was informed to write this letter. I was informed per telephone conversation that I should of received the notice in January and July of this year. Please except payment of the regular filing fee of \$150.00 and reconsider my application.

Thank you for your cooperation,

Timothy P. Ryan



Owner/Operator
Jensen Beach Automotive