

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

FILED

03 OCT 24 AM 10:18

DOCUMENT # P98000085380

1. Corporation Name

FINANCIAL FRUITCAKES, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT 03



500024058975

10/24/03--01007--016 \*\*150.00

Principal Place of Business

Mailing Address

222 INDUSTRIAL BLVD.

SUITE 197

NAPLES FL 34104

US

222 INDUSTRIAL BLVD.

SUITE 197

NAPLES FL 34104

US

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

2. New Principal Office Address, If Applicable

130 Penny Lane #2

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

P.O. Box 773

Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

10/05/1998

5. FEI Number

65-0981476

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

City & State

Naples FL

City & State

Naples FL

Zip

34112-5107 Collier

Country

Zip

34106-0773 Collier

Country

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	4 City / State / Zip
PRES	BARLOW, RAEYN	<del>222 INDUSTRIAL BLVD., SUITE 197</del> 130 Penny Lane #2, Naples	NAPLES FL 34104 34112-5107
TREA	LITCHFIELD, JAMIE M	<del>222 INDUSTRIAL BLVD., SUITE 197</del> 130 Penny Lane #2	NAPLES FL 34104 34112-5107
SEC	LITCHFIELD, NIOSE E	<del>222 INDUSTRIAL BLVD., SUITE 197</del> 130 Penny Lane #2	NAPLES FL 34104 34112-5107

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

VOLPE, MICHAEL J ESQ  
711 5TH AVENUE SOUTH  
SUITE 201  
NAPLES FL 34102

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. or 617.0505, F.S.

Signature of  
Registered Agent

Michael J Volpe Esq

Date

10/15/03

REGISTERED AGENT MUST SIGN

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 1.19.07(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:

Raeyn Barlow

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/19/03

Date

239-649-5437

Daytime Phone #

CR2E040 (7/03)

**THE TV SHOW STARRING GOOD MONEY VALUES!**



October 15, 2003

To whom it may concern:

Our offices did not receive the two prior Uniform Business Report notices, which may be due to two mailing address changes in the last 8 months. The post office forwarding may have expired on the original address change from 222 Industrial Blvd.

**Our current street address is:**

Financial Fruitcakes, Inc.  
130 Penny Lane #2  
Naples, FL 34112-5107

**Our P.O. Box, which shall remain a constant mailing address, is:**

Financial Fruitcakes, Inc.  
P.O. Box 773  
Naples, FL 34106-0773

Enclosed is the application and check, as instructed. Please contact us if any questions.

Thank you,

Raelyn Barlow, President