

APPLICATION
FOR
REINSTATEMENT



APPROVED
AND
FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

Principal Place of Business

Mailing Address

P O BOX 992
BELL FL 32619

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

2. New Filing Office Address (If Applicable)

3 New Mailing Office Address, If Applicable

Suite Apt #, etc

Suite, Apt. #, etc. P.O. Box 330

City & State

City & State
BRANford 7

$$Z_{15}$$

Country

Zip 32008

Country

Country
USA

4. Date Incorporated or Qualified To Do Business in Florida

10/09/1998

5. FBI Number
59-3540693

Applied For

Not Applicable

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	LEWIS, GLORIA	11350 NW 15TH AVE	BRANFORD FL 32008
			900003063179--1 -12/07/99--01058--021 ****150.00 ****150.00
			900003063179--1 -12/07/99--01058--022 *****8.75 *****8.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LEWIS, GLORIA
11350 NW 15TH AVE
BRANFORD FL 32008

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 _____
Keymaster of Airport _____

REGISTERED AGENT MUST SIGN

Date _____

10/18/99

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone #

0007060 AF

**WINDMILL RANCH AND AUCTION INC.
11300 N W 15TH AVENUE
BRANFORD FLORIDA 32008**

904 935 9300

October 19, 1999

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

Dear Sir:

As per my telephone conversation yesterday, I have completed the application for reinstatement of Windmill Ranch and Auction, Inc. Document # P988000088279.

We completed the paper in October, 98 however, we did not open for business until February, 99. I was not aware we were due for the form to be completed. We did not receive any correspondence. I saw the postmaster of Bell at a ball game and he said he kept getting letters from the state and he had one now. I went by the post office and picked up this form. I appreciate your consideration and I have corrected the Mailing address on the form. The mailing city is Branford Florida not Bell Florida.

The physical address is
Windmill Ranch and Auction Inc
11300 N. W. 15th Avenue
Branford Florida 32008

The Mailing address is
Windmill Ranch and Auction Inc
P. O. Box 330
Branford Florida 32008

The companies check for \$150.00 is enclosed.

Sincerely,


Gloria Lewis
Secretary/Treasurer

Enclosure 2