

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2001
APPLICATION

FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P99000000769

1. Corporation Name

VANGUARD PAINTING, INC.

Principal Place of Business

Mailing Address

1120 MINEOLA CIRCLE
PALM HARBOR FL 34683

1120 MINEOLA CIRCLE
PALM HARBOR FL 34683

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/05/1999

5. FEI Number

59-3549657

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
0	KAZOGLES, MICHAEL	1120 MINEOLA CIRCLE	PALM HARBOR FL 34683

600004716646--1
-12/10/01--01084--018
***150.00 ***150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KAZOGLES, MICHAEL
1120 MINEOLA CIRCLE
PALM HARBOR FL 34683

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

Michael S. Kazogles
REGISTERED AGENT MUST SIGN

Date

10-13-01

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael S. Kazogles
MICHAEL S. KAZOGLES

Date

Daytime Phone #

11-5-01

10-13-01 (727) 639-5603

192

FILED

01 NOV -9 AM 10:50

SECRETARY OF STATE
TALLAHASSEE FLORIDA



CR2ED40 (8/01)

292

VANGUARD PAINTING, INC.

1120 MINEOLA CIRCLE ~ PALM HARBOR, FL 34683
OFFICE: 727.785.8166 FAX: 727.771.6517

To whom it may concern,

I Michael Kazogles of Vanguard Painting,

Would like to bring attention that I didn't

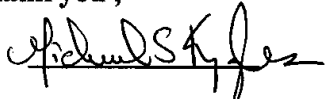
receive a application for reinstatement,

for this Corporation. Now that I am reminded

I will make sure payment is paid on time,

reguardless of the mail.

Thank you ,



Pres./ Registered Agent
Michael S. Kazogles

Any Questions please call :

727-639-5603