

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P99000010192

1. Corporation Name

D'LAND HOLDING CO., INC.

Principal Place of Business

8750 #167
8250 GLADIOLOUS DRIVE #167
FORT MYERS FL 33908

Mailing Address

8750 #167
8250 GLADIOLOUS DRIVE #167
FORT MYERS FL 33908

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

2. New Principal Office Address, If Applicable

8750 GLADIOLOUS DR.

Suite, Apt. #, etc.

167

City & State

FT. Myers, FL

Zip

33908

Country

Lee

3. New Mailing Office Address, If Applicable

8750 GLADIOLOUS DR.

Suite, Apt. #, etc.

167

City & State

FT. Myers, FL

Zip

33908

Country

Lee

4. Date Incorporated or Qualified
To Do Business in Florida

02/02/1999

5. FEI Number

☒ 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
D	TOMASI, DANIEL T	8250 GLADIOLOUS DRIVE #167 8750 #167	FORT MYERS FL 33908
Pres	TOMASI, George R	8750 GLADIOLOUS DR #167	Fort Myers, 33908
			300003828393--0 -03/03/01--01066--029 ***908.75 ***908.75

REINSTATEMENT 2000-01

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

9. Name and Address of New Registered Agent

Name

George R. Tomasi

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

13451 McGregor Blvd.

Suite, Apt. #, Etc.

28

City

Fort Myers

State

FL

Zip Code

33919

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

George R. Tomasi

REGISTERED AGENT MUST SIGN

Date 3-06-01

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:

George R. Tomasi

SIGNATURE AND DATED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-06-01

Date

941-433-3388

Daytime Phone #

CR2E040 (8/00)