

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 MAY -1 AM 11:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1 of 2
K

DOCUMENT # P99000023736

1. Corporation Name

COSGROVE OF SARASOTA CORPORATION

Principal Place of Business

4658 Oak Hollow Drive
Sarasota, FL 34241

Mailing Address

4658 Oak Hollow Drive
Sarasota, FL 34241

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 Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida
3/15/99

DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-0915361

Not Applicable

Zip

Country

Zip

Country

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	Barbara A. Keyser	4658 Oak Hollow Drive	Sarasota, FL 34241

4000004288444-1
-05/22/01--01137--012
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Barbara A. Keyser
4658 Oak Hollow Drive
Sarasota, FL 34241

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

REGISTERED AGENT MUST SIGN

Date 4/30/01

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Barbara A. Keyser

4/30/01

(941) 371-0601

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COSGROVE OF SARASOTA CORPORATION

4658 Oak Hollow Drive
Sarasota, FL 34241

April 16, 2001

VIA FEDERAL EXPRESS

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Cosgrove of Sarasota Corporation
Document #P99000023736

Dear Sir or Madam:

Enclosed please find the following with regard to the above corporation:

1. Copy of cancelled check #112 payable to the Florida Department of Revenue in the amount of \$150.00 dated April 26, 2000 representing the annual report filing fee for the year 2000;
2. Application for Reinstatement; and
3. Check in the amount of \$150.00 representing the annual report filing fee for the year 2001.

It is my understanding that the reinstatement fee will be waived since I never received notice from you that the annual report filed in the year 2000 was deficient and since my check for the annual report filing fee was cashed by the Department of State.

Thank you for your cooperation in this matter.

Sincerely,

Barbara A. Keyser

Barbara A. Keyser, Director