

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

Fax Audit No. H00000051176 6

DOCUMENT # P99000026558

1. Corporation Name

PALMETTO ESTATES, INC.

Principal Place of Business

323-10th Ave W
Suite 103
Palmetto, FL 34221

Mailing Address

323-10th Ave W
Suite 103
Palmetto, FL 34221

REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 SEP 27 PM 1:55

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

2. New Principal Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, if Applicable

802 11th Street West

Suite, Apt. #, etc.

City & State

Bradenton, FL

Zip

34205

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

03/23/1999

5. FEI Number

XX

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PSTD	DAVID P. LEWIS	323-10th Ave W, Suite 103	Palmetto, FL 34221

8. Name and Address of Current Registered Agent

BLALOCK, LANDERS, WALTERS & VOGLER, P.A.
802-11th Street West
Bradenton, FL 34205

9. Name and Address of New Registered Agent

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 09/27/2000

Fax Audit No. H00000051176 6

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.Yes ☐ No ☒(See other side for information
on intangible tax.)

12. 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)(f), 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:

David P. Lewis

DAVID P. LEWIS, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/27/2000

(941) 729-8188

Date Daytime Phone #
Fax Audit No. H00000051176 6

Division of Corporations

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Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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(((H00000051176 6)))

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To:

Division of Corporations

Fax Number : (850) 922-4004

From:

Account Name : BLALOCK, LANDERS, WALTERS AND VOGLER, P.A.

Account Number : 076666003611

Phone : (941) 748-0100

Fax Number : (941) 745-2093

CORPORATION REINSTATEMENT**PALMETTO ESTATES, INC.**

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$758.75

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