


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # P99000029334

00 OCT 20 PM 3:45

1. Corporation Name

SUCCESS UNLIMITED, INC.

Principal Place of Business

Mailing Address

4836 14 STREET  
BRADENTON FL 34207

4836 14 STREET  
BRADENTON FL 34207



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

4. Date Incorporated or Qualified  
To Do Business in Florida

03/26/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0910065

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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	HAMMOND, JOSEPH M	4836 14TH ST. WEST	BRADENTON FL 34207

300003446813--9

11/01/00 01050 016

\*\*\*150.00 \*\*\*150.00

10/17/00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RITTENHOUSE, TASHA J  
1549 RINGLING BLVD #602  
SARASOTA FL 34236

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

*Tasha Rittenhouse*

Date 10-17-00

REGISTERED AGENT MUST SIGN

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

*Joseph M. Hammond*

Joseph M Hammond, Pres.

Date

10/17/00

Daytime Phone #

(941) 248-4653

**Success Unlimited, Inc.  
4836 14<sup>th</sup> Street West  
Bradenton, Florida 34207**

October 17, 2000


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

To Whom It May Concern

We sent in a check for \$150 and our completed annual report on April 28, 2000. To date, the check has not been cashed, and our company has been administratively dissolved. Per our conversation with your agent, Andy Dunlap, on October 16, 2000, we are again sending completed paperwork and another check for \$150, so that you can reinstate our corporation.

Thank you for your assistance.

Sincerely

  
Joseph M. Hammond  
President