

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 FEB 15 PM 2:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000065198

1. Corporation Name

Carlisle Trucking and Land Clearing, Inc.

700066217787
02/20/06--01081--021 **1800.00

REINSTATEMENT 00.06
CR2E081 (8/05)

2. Principal Office Address

4317 Gary Rd.

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 1102

Suite, Apt. #, etc.

City & State

Green Cove Springs, FL

City & State

Green Cove Springs, FL

Zip

32043

Country

U.S.

Zip

32043

Country

U.S.

**4. Date Incorporated or Qualified
To Do Business in Florida**

7/15/1999

5. FEI Number

59-2534228

☐ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Gary G. Carlisle

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

4317 Gary Rd.

Suite, Apt. #, Etc.

City

Green Cove Springs,

State

FL

Zip Code

32043

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Gary George Carlisle
REGISTERED AGENT MUST SIGN

Date February 13, 2006

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Gary George Carlisle, President	4317 Gary Road	Green Cove Springs, FL 32043
VP	Gregory George Carlisle, Vice President	4317 Gary Road	Green Cove Springs, FL 32043
T	Carrie Sharon Carlisle, Treasurer	4317 Gary Road	Green Cove Springs, FL 32043

10. 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)(l), 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:

Gary George Carlisle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-13-2006

Date

904-219-3235

Daytime Phone #