

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 13 PM 12:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P99000071894**

1. Corporation Name

BLEDSON'S ELLENTON CAFE, INC.

Principal Place of Business

7044 HWY 301
ELLENTON FL 34222

Mailing Address

527 36TH ST WEST
PALMETTO FL 34221

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

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/06/1999

5. FEI Number

65-0939509

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	BLEDSON, HOMER	527 36TH ST WEST	PALMETTO FL 34221

500023767915
10/13/03--01101--013 **150.00

8. Name and Address of Current Registered Agent

BLEDSON, HOMER
527 36TH ST WEST
PALMETTO FL 34221

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. or 617.0505, F.S.

Signature of
Registered Agent

Homer Bledson

REGISTERED AGENT MUST SIGN

Date

10/9/03

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:

Homer Bledson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/9/03 941-723-1138

Daytime Phone #

CR2E040 (7/03)

JOHN R. RUSSO, EA

6400 Manatee Ave W. • Ste H • Bradenton, FL 34209

Tel: (941)-795-2000 (800)-735-2080 Fax: (941)-798-9799

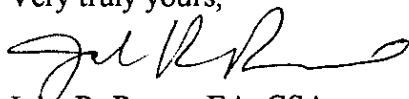
October 9, 2003

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

Re: Bledsoe's Ellenton Café, Inc.
EIN: 65-0939509

Be advised that the above mentioned client has not received the 2003 Uniform Business Report. A check in the amount of \$150.00 is enclosed with a form. We are asking for a waiver of reinstatement fees.

Very truly yours,



John R. Russo, EA, CSA