PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

REINSTATEMENT 1995 1996

DOCUMENT # S23826

1. Corporation Name
GARAND'S LANDSCAPE DESIGNS, INC.

FILED
96 DEC -2 PM 12:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MW3 12-2-96

Principal Place of Business	Mailing Address
12607 TRUCIOUS PLACE TAMPA FL 33625	12607 TRUCIOUS PLACE TAMPA FL 33625

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc. 15113 Bald Eagle St.	Suite, Apt. #, etc. 15113 Bald Eagle St.
City & State TAMPA, FL.	City & State TAMPA, FL.
Zip 33625 Country U.S.A.	Zip 33625 Country U.S.A.

4. Date Incorporated or Qualified To Do Business in Florida 01/09/1991

5. FEI Number 59-3047285 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

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 D/P	GARAND, DONALD	~~12607 TRUCIOUS PLACE~~ 15113 Bald Eagle ST.	TAMPA FL 33625
~~D~~	~~GARAND, LAURA~~ NO LONGER AN OFFICER	~~12607 TRUCIOUS PLACE~~	~~TAMPA FL 33625~~ 900[illegible]2019709--2 -12/04/96--01097--006 *****575.00 *****575.00
S/T	Garand, Mary (New officer)	15113 Bald Eagle St.	Tampa, FL. 33625
			900[illegible]2019709--2 -12/04/96--01097--006 *****575.00 *****400.00

8. Name and Address of Current Registered Agent

LUPPENS, LAWRENCE H., JR.
100 TWIGGS STREET
SUITE 300
TAMPA FL 33602
Has passed away

9. Name and Address of New Registered Agent

Name: Donald A. Garand
Street Address (P.O. Box Number is Not Acceptable): 15113 Bald Eagle St.
Suite, Apt. #, Etc.:
City: Tampa, FL. State: FL Zip Code: 33625

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: Donald A. Garand SIGNATURE REQUIRED Date: 9/30/96
REGISTERED AGENT MUST SIGN

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)

12. 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.)

13. 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: Donald A. Garand SIGNATURE REQUIRED 9/30/96 813-926-1175
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E030 (1/95)