PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING

APPLICATION FOR REINSTATEMENT

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

FILED
1996 NOV 12 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S33680**

1. Corporation Name

TIMOTHY GRANT ROOFING AND CLEANING, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 4053 FORT MYERS FL 33918	POST OFFICE BOX 4053 FORT MYERS FL 33918

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

REINSTATEMENT 11/18/96

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
2620 North Tamiami Trail			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: North Fort Myers, FL		City & State	
Zip: 33818	Country: Lee	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: 02/25/1991

5. FEI Number: 65-0244097 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ [redacted]

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P D	FEWOX, ROBERT D	728 HIGGINS ROAD	N FT MYERS FL 33917
VP	LONG, ROBERT S	1701 BROWN ROAD	ALVA FL 33920
~~T~~	~~FEWOX, DENNIS~~	~~829 CAPITAL DRIVE~~	~~NO. FORT MYERS FL 33918~~
~~D~~	~~GRANT, DELLA C~~	~~1200 KNOLLWOOD ROAD~~	~~MINERAL BLUFF GA 30917~~
ST	FEWOX, RICHARD	8385 Ebson Drive	North Ft. Myers, FL 33917

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
WINESETT, ROBERT A. 2248 FIRST ST. FT. MYERS FL 33901	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City · State FL · Zip Code

900002010159--9
11/20/96--01100--008
****375.00 ****375.00

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: [signature] REQUIRED — REGISTERED AGENT MUST SIGN. Date: 11/7/96

11. 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.)

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)(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] ROBERT FEWOX, President 11/7/96 941-277-3110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR · Date · Daytime Phone #

CR2E040 (7/96)