

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Florham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **S87184**

1. Corporation Name

LAWN CARE MAINTENANCE INC
3630 NW 118 AVENUE #5
COAL SPRINGS FL 33065

Principal Place of Business

Mailing Address

3630 NW 118 AVENUE #5
COAL SPRINGS FL 33065

3630 NW 118 AVENUE #5
COAL SPRINGS FL 33065

FILED

98 FEB -2 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 94-98

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/14/91

5. FEI Number

65-0298499

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$0.75 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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	THOMAS M. LEPORE	3640 NW 118 AVE #5 COAL SPRINGS FL 33065	COAL SPRINGS FL 33065

7000002422577-6
-02/05/98-01071-008
*****150.00 ***150.00**
7000002422577-6
-02/05/98-01071-008
*****1245.00 ***1245.00**
23-98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

THOMAS M. LEPORE
3630 NW 118 AVE #5
COAL SPRINGS FL 33065

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

Thomas M. Lepore

REGISTERED AGENT MUST SIGN

Date

23 Jan 98

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:

Thomas M. Lepore
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
(PRES)

Date

11/30/97 **854-345-5296**
Daytime Phone #



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 17, 1997

LAWNCARE MAINTENANCE, INC.
3640 NW 118 AVE. #5
CORAL SPRINGS, FL 33065

*PLEASE CHANGE ADDRESS TO:
3630 N.W. 118 AVE #5.
CORAL SPRINGS, FL 33065*

SUBJECT: LAWNCARE MAINTENANCE, INC.
Ref. Number: S87184

*Thank you,
Sandra B. Mortham*

We have received your document for LAWNCARE MAINTENANCE, INC. and check(s) totaling \$1245.00. However, your check(s) and document are being returned for the following:

Pursuant to section 607.1422(1)(b), 617.1422(1)(b), or 608.4482, Florida Statutes, your designated registered agent must acknowledge the designation by signing in the appropriate block of the form.

Corrected reinstatements received after January 1, 1998, will need to include the fees for 1998. Please call our office for the total amount due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Trevor Brumbley
Document Specialist

Letter Number: 597A00059184