

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # V02437

1. Corporation Name

Denny's Shoes Inc.

Principal Place of Business

Mailing Address

603 North Pine St.
Sebring, FL 33870

603 North Pine St.
Sebring, FL 33870

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

12/19/91

5. FEI Number

59-3098616

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)

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
President Director Treasurer Director Secretary Director	Marlene B. vonMerveldt	3149 Shortwood Rd.	Sebring, FL 33870
	Paul J. vonMerveldt	3149 Shortwood Rd.	Sebring, FL 33870
	Guy Newton	4605 Leona St.	Tampa, FL 33629

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***915.00 ***915.00

5/22/97

8. Name and Address of Current Registered Agent

Pennis L Queen
2821 Kenilworth Blvd.
Sebring, FL 33870

9. Name and Address of New Registered Agent

Name Marlene B. von Merveldt
Street Address (P.O. Box Number is Not Acceptable)
3149 Shortwood Rd.
Suite, Apt. #, Etc.
City Sebring, FL
State FL Zip Code 33870

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 Marlene B. von Merveldt
REGISTERED AGENT MUST SIGN

Date 5/22/97

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:

Marlene B. von Merveldt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Marlene B. vonMerveldt

5/22/97 941-382-1253
Date Daytime Phone #

CR2E040 (12/96)