

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



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

FILED

96 NOV 15 PM 12:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V14355**

1. Corporation Name

DOUGH FOR DOUGH, INC.

Principal Place of Business

Mailing Address

1344 S 14 ST
LEESBURG FL 34708

401 S 14 ST
LEESBURG FL 34708

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

2. New Principal Office Address, if Applicable

953 N. 14 ST.
Suite, Apt. #, etc.

3. New Mailing Office Address, if Applicable

953 N. 14 ST.
Suite, Apt. #, etc.

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

02/14/1992

5. FEI Number

59-3108820

Applied For

Not Applicable

City & State

Leesburg, Florida

City & State

Leesburg, Florida

Zip

34748

Country

LAKE

Zip

34748

Country

LAKE

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)

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	BRADLEY, STEVE	605 LEWIS ST.	FRUITLAND PARK FL 34731
S	BRADLEY, ANITA C.	605 LEWIS ST.	FRUITLAND PARK FL 34731
V	CANTERBURY, CECIL	2875 NE 32ND PLACE	OCALA FL
D	CANTERBURY, BETTY	2875 NE 32ND PLACE	OCALA FL

900002009839--S
-11/20/96--01073--016
#375.00 #375.00

JB/HB-96

8. Name and Address of Current Registered Agent

**BRADLEY, STEVE
605 LEWIS ST.
FRUITLAND PARK FL 34731**

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

STEVE BRADLEY
REGISTERED AGENT MUST SIGN

Date

11-11-96

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:

STEVE BRADLEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-11-96

Date

(352)

782 2600
Daytime Phone #