

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

98 DEC -8 AM 11:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400002711744-5
-12/14/98--01098--003
***750.00 ***750.00

98

DOCUMENT # 169919

1. Corporation Name

Flintstone Collier County Lawn + Tree Service, Inc.

Principal Place of Business

Mailing Address

Collier County

6025 GREEN Blvd
NAPLES FL 34116

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

2. New Principal Office Address, If Applicable

6025 GREEN Blvd

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

1992

5. FEI Number

65-0518814

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
<u>P</u>	<u>Richard W. Wooten</u>	<u>6025 GREEN Blvd</u>	<u>NAPLES FL 34116</u>
<u>✓</u>	<u>BARBARAK Wooten</u>	<u>SAME AS ABOVE</u>	

12/10/98

REINSTATEMENT 98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Ed Bryant, Jr
700 Eleventh St So.
NAPLES FL 34102
Renthouse II

Name

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

Suite, Apt. #, etc.

City

State

Zip Code

FL

34102

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]

REGISTERED AGENT MUST SIGN

Date

11/24/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

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]

Richard W. Wooten

Date

11-9-98

Daytime Phone #

941-353-0103