

V73229

STATE OF FLORIDA
OFFICE OF THE COMPTROLLER
APPLICATION FOR REFUND

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State Treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section _____*, Florida Statutes, I hereby apply for a refund of moneys I paid into the State Treasury, which are subject to refund. The following information is submitted to substantiate the claim.

THE INFORMATION IN THIS BOX WILL BE USED TO WRITE AND MAIL YOUR REFUND CHECK. PLEASE TYPE OR PRINT LEGIBLY.

Name: <u>Mr. and Mrs. James J. Wood</u>	EIN or SS#: <u>481-34-7651</u>
Address: <u>5950 Sonoma Lane</u>	
<u>Naples, Florida 34119</u>	
Amount: <u>\$35.00</u>	Date Paid: <u>6/26/97</u>
Reason for Claim: <u>Withdrawal of change of registered agent filing fee.</u>	
<u>S. Harris/Amendments</u>	
<u>DAWN FINANCIAL CORPORATION, V73229</u>	
Certified true and correct this <u>20th</u> day of <u>June</u> , 19 <u>97</u>	
Signature <u>Marilyn S. Wood</u>	
* Must be completed if authority is other than Section 215.26, Florida Statutes.	

Do Not Write in This Box - For Agency Use Only	
Agency recommends approval of above claim and submits the following information to substantiate the claim:	
Amount of recommended refund \$ <u>35.00</u>	
The amount requested above was originally deposited into the State Treasury, as a part of the funds deposited on:	
State Treasurer's Receipt No. <u>01068--008</u> dated <u>03/13/97</u>	
NAME OF ACCOUNT: <u>45202130001453000000000010000</u>	
Statutory Authority for Collection <u>607.0122</u>	
It is requested that payment be made from the following account:	
NAME OF ACCOUNT: <u>45202130001453000000002002000</u>	
Certified true and correct this _____ day of _____, 19 _____	
<u>Department of State, Division of Corporations</u>	<u>(Authorized Agency Signature and Title)</u>
<u>(Agency)</u>	

KELLY, PRICE, PASSIDOMO & SIKET
ATTORNEYS AT LAW

GREY OAKS BUILDING
2640 GOLDEN GATE PARKWAY
SUITE 315
NAPLES, FLORIDA 34105-3203

Office Use Only

NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

800002112548--1
-03/13/97-01068--008
*****35.00 *****35.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

KELLY, PRICE, PASSIDOMO & SIKET
CHARTERED

CHARLES M. KELLY, JR.
BOARD CERTIFIED TAX LAWYER
BOARD CERTIFIED WILLS
TRUSTS AND ESTATES LAWYER
MASTER OF LAWS IN ESTATE PLANNING
CERTIFIED PUBLIC ACCOUNTANT

KATHLEEN C. PASSIDOMO
BOARD CERTIFIED REAL ESTATE LAWYER

R. SCOTT PRICE
ANDREW G. SIKET

ATTORNEYS AT LAW

GREY OAKS BUILDING
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SUITE 315
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JASON H. KORN

OF COUNSEL

RONALD A. LISAK*

JEROME M. STRAUSS*
FELLOW THE AMERICAN COLLEGE
OF TRUST AND ESTATE COUNSEL

*ALSO ADMITTED IN INDIANA

May 2, 1997

Via Federal Express

Mr. and Mrs. James J. Wood
4 Harbor Hill Road
Provincetown, Massachusetts 02657

Re: Dawn Financial Corporation

Dear Mr. and Mrs. Wood:

Enclosed please find the Application for Reinstatement for Dawn Financial. Please sign the form where indicated and forward the application, along with all the other enclosures that are attached to the Division of Corporations in the federal express envelope we have provided.

If you should have any questions or comments, please do not hesitate to contact me.

Sincerely yours,



Charles M. Kelly, Jr.

CMK/cap
Enclosures

k:l.04



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 14, 1997

Kelly, Price, Passidomo & Siket
2640 Golden Gate Pky.
Suite 315
Naples, FL 34105-3203

SUBJECT: DAWN FINANCIAL CORPORATION
Ref. Number: V73229

We have received your document for DAWN FINANCIAL CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 1996 corporate annual report form. To reinstate, the corporation must submit a completed reinstatement application/annual report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$585.00 reinstatement fee, \$61.25 filing fee per year for the years 1996 through the current year, \$103.75 corporate supplemental fee for 1992 and every year thereafter.

Therefore, the total amount due to reinstate the corporation is \$915.00. Add an additional \$8.75 for each certificate of status requested.

The total amount due includes the 1997 Annual Report and Supplemental Fee.

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 (904) 487-6908.

Steven Harris
Corporate Specialist

Letter Number: 097A00013151

*Mailed
App. 5/14*