

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 NOV -5 AM 11:56

DOCUMENT # F15425

1. Corporation Name

HARBOUR CASTLE INVESTMENTS, CORP.

Principal Place of Business

1749 Sandalwood Drive
Sarasota, FL 34231

Mailing Address

c/o Ruth Hart-Stephens
55 Harbour Square
Suite 2811
Toronto, Ontario
CANADA M5J 2L1

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

2. New Principal Office Address, If Applicable

N/A

3. New Mailing Office Address, If Applicable

N/A

4. Date Incorporated or Qualified
To Do Business in Florida

1/20/81

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2352368

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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 |
|---------------|---|--|------------------------------------|
| STD | Ruth Hart-Stephens | 55 Harbour Square Suite 2811 | Toronto, Ontario Canada M5J 2L1 |
| | | | |
| | | | |
| | | | 000003046460--6 |
| | | | -11/16/99--01103--012 |
| | | | ****750.00 ****750.00 |
| | | | |
| | | | |

8. Name and Address of Current Registered Agent

John M. Dart
1549 Ringling Boulevard, Suite 600
Sarasota, FL 34236

9. Name and Address of New Registered Agent

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

John M. Dart

REGISTERED AGENT MUST SIGN

Date 10/26/99

11. This corporation owes 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:

Ruth Hart-Stephens
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oct 29/99
Date

9052753000
Daytime Phone #

CR2E081 (12/98)