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
97 NOV 13 AM 10:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000043831

1. Corporation Name
South Harbour Management Group, Inc.

Principal Place of Business	Mailing Address
127 South Alcaniz St. Pensacola, FL 32501	Same

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 6/6/95

5. FEI Number 59-3324325 ☐ 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
P	David T. Clark	127 South Alcaniz Street	Pensacola, FL 32501
VST	Richard R. McAlpin	127 South Alcaniz Street	Pensacola, FL 32501

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-11/14/97--01070--003
****165.00 ****165.00

8. Name and Address of Current Registered Agent

David T. Clark
127 South Alcaniz St.
Pensacola, FL 32501

9. Name and Address of New Registered Agent

Name: Clark, David T.
Street Address (P.O. Box Number is Not Acceptable): 401 E. Chase St.
Suite, Apt. #, Etc.: Suite 105
City: Pensacola State: FL Zip Code: 32501

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 David T Clark Date 11-7-97
REGISTERED AGENT MUST SIGN

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: David T Clark 11-5-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

DRE6040 (12/96)

SOUTH HARBOUR MANAGEMENT GROUP, INC.

(2)

November 5, 1997

Division of Corporation
P.O. Box 6327
Tallahassee, FL. 32314

To Whom It May Concern:

This letter is to serve as notice that South Harbour Management Group, Inc. never received notification of reinstatement which resulted in the dissolution of said corporation. Please allow the reinstatement fee to be waived because of the fact.

Thank you for your time and consideration in the matter.

Sincerely,

Richard R. McAlpin
President

127 SOUTH ALCANIZ STREET •PENSACOLA, FLORIDA • 32501
PHONE: 904-432-3090 • FAX: 904-432-9056