

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 373196

1. Corporation Name

Bailey & Casey Inc.

Principal Place of Business

Mailing Address

800 Southeast Third Ave.
Ft Lauderdale, Fl. 33316

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

2. New Principal Office Address, If Applicable
800 S.E. 3rd Ave.

3. New Mailing Office Address, If Applicable
800 S.E. 3rd Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Ft. Lauderdale Florida

City & State
Ft Lauderdale Florida

Zip
33316

Country
Broward

Zip
33316

Country
Broward

4. Date Incorporated or Qualified
To Do Business in Florida 09/26/70

5. FEI Number

59-1307764

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/D	Dewitt Casey	3200 Port Royale Dr. #1806	Ft Lauderdale, Fl. 33308
D	Charles W. Bailey	338 W. Heather Dr.	Key Biscayne, Fl. 33149
D	Clinton M. Casey	777 So. Fed. Hwy. RP 503	Pompano Bch., FL 33062

8. Name and Address of Current Registered Agent

Charles W. Bailey
338 W. Heather Dr.
Key Biscayne, Fl. 33149

9. Name and Address of New Registered Agent

Name
Brian C. Deuschle
Street Address (P.O. Box Number is Not Acceptable)
800 S.E. 3rd Ave
Suite, Apt. #, Etc.

City
Ft Lauderdale

State
FL

Zip Code
33316

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

REGISTERED AGENT MUST SIGN

Date

10/23/98

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10.22.98 (954) 720.0036

FILED

98 OCT 26 AM 9:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-11/03/98-01028-004

****900.00 ****900.00

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