

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV -1 AM 7:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F01000002042

1. Corporation Name

PRESTIGE TITLE, INC.

Principal Place of Business

4300 BAYOU BLVD., SUITE 26
PENSACOLA FL 32503

Mailing Address

4300 BAYOU BLVD., SUITE 26
PENSACOLA FL 32503



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

02

4. Date Incorporated or Qualified
To Do Business in Florida

04/11/2001

5. FEI Number

64-0916518

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)

Title(s)

Name of Officers
and/or Directors

Street Address of Each
Officer and/or Director

City / State / Zip

P

COLSON, STEPHEN R

2301 14TH STREET, SUITE ~~500~~
400

GULFPORT MS 39501

700008763377
11/01/02-01097-001 **758.75

8. Name and Address of Current Registered Agent

COLSON, STEPHEN R
4300 BAYOU BLVD., SUITE 26
PENSACOLA FL 32503

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

CR2E040 (8/02)

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN Stephen R. Colson

Date

10/29/02

11. 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Stephen R. Colson

10/29/02

Daytime Phone #

(850) 484-7979

Prestige Title, Inc.

*Stephen R. Colson, Attorney
4300 Bayou Blvd., Ste. 26
Pensacola, FL 32503
Telephone 850-484-7979
Telecopy 850-484-7473
tdowns@prestigititleinc.com*

October 30, 2002

Department of State
Division of Corporations

Please accept payment for reinstatement.

This was on oversight on the accounting department.

Thank you,



Stephen R. Colson
President