# F1400000277

(Re	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
. (Bu	siness Entity Nan	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
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Office Use Only



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SECRETARY OF STATE OIVISION OF CORPORATIONS

DEPARTMENT OF STATE

14 JUL - 3 AN N: 42

1/20/

### DEPARTMENT OF STATE ACCOUNT FILING COVER SHEET

Account Number	FCA00000017		
Date:	7-3-14	······································	
Requestor Name:	Carlton Fields Jorden Burt, P.A.		
Address:	Post Office Drawer 190 Tallahassee, Florida 32302		
Telephone:	(850) 513-3619 - direct (850) 224-1585		
Contact Name:	Kim Pullen, CP, FRP		
Corporation Name:	Bannon Deve	elopment, Inc.	
Email Address: Entity Number: Authorization:	jgiles @ CFJI	3/aw.com	
Certified Copy  New Filings  Fictitious Name	Plain Stamped Copy  Amendments	Certificate of Status  Annual Report  Registration	
(X) Call When Ready (X) Walk In	(X)Call if Problem ()Will Wait	( ) After 4:30 (X) Pick Up	

9501656.4

CF Internal Use Only

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#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

<sub>1.</sub> Bannon D	Development Inc.			
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	)," "CON	MPANY," "CORPORATION,"	
7.6				
Doloveoro	ble in Florida, enter alternate corporate name	-	1 for the purpose of transacting b 2462596	usiness in Florida)
4.	y under the law of which it is incorporated)		(FEI number, if applic	
3/28/2013	· · · · · · · · · · · · · · · · · · ·	Per	petual	,
4	of incorporation)	•	tion: Year corp. will cease to ex	ist or "perpetual")
6.				
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1			
700 Ponte	e Vedra Lakes Blvd., Pont			
7. 100 1 Onte	(Principal office ad		ara Doaon, 1 E 020	
c/o Atty Joel B.	Giles, Carlton Fields Jorden Burt, P.A., 4	,	Boy Scout Blvd., Suite 1000,	Гатра, FL 33607
	(Current mailing ad	dress)		
				•
8. Name and stree	t address of Florida registered agent: (P.	.O. Box	NOT acceptable)	1 9
Name:	CFRA, LLC			OF 4
Office Address:	100 S. Ashley Drive, Suite	400		NOF
•	Tampa		Florida 33602	PA CONTRACTOR
	(City)	·-·,	(Zip code)	F STV
9. Registered age	ent's acceptance:			SO NOT
	ed as registered agent and to accept ser			
	application, I hereby accept the appoint omply with the provisions of all statutes			
duties, and I am f	amiliar with and accept the obligations	of my p	osition as registered agent.	-

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

·
1]. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director: J. Thomas Dodson
Address:
Director:
Address:
B. OFFICERS
President: J. Thomas Dodson
700 Ponte Vedra Lakes Blvd., Ponte Vedra Beach, FL 32082
Additess.
Vice President: Arthur E. Lancaster
Address: 700 Ponte Vedra Lakes Blvd., Ponte Vedra Beach, FL 32082
Addition.
Secretary: J. Thomas Dodson
700 Ponte Vedra Lakes Blvd., Ponte Vedra Beach, FL 32082
Treasurer: J. Thomas Dodson
Address: 700 Ponte Vedra Lakes Blvd., Ponte Vedra Beach, FL 32082
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
Signature of Director or Officer
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
Arthur E. Lancaster

(Typed or printed name and capacity of person signing application)

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BANNON DEVELOPMENT INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF MAY,

A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BANNON DEVELOPMENT INC." WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF MARCH, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

5310783 8300

140701172

Jeffrey W. Bullock, Secretary of State

AUTHENTXCATION: 1397753

DATE: 05-23-14

You may verify this certificate online at corp.delaware.gov/authver.shtml