


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 JAN 16 AM 7:59 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # F26429 1. Corporation Name BYRON LEISURE CORP				95- REINSTATEMENT	
Principal Place of Business 40 HUGHES SNELL & CO. ATTN: PATTI HARDIN CPA 1470 ROYAL PALM SQ. BLVD. FORT MYERS, FLORIDA 33919				Mailing Address (Same as Principal Place of Business)	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.				DO NOT WRITE IN THIS SPACE	
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida 3/23/1981	
		5. FEI Number 59-2129778		Applied For <input type="checkbox"/> Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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 (Do NOT Use Post Office Box Numbers)	City / State / Zip		
CD	KENNETH S. FAIRBAIN	128 LADY BYRON LANE SOLIHUL, UNITED KINGDOM			
ST VD	RITA H. FAIRBAIN	128 LADY BYRON LANE SOLIHUL, UNITED KINGDOM			
			200002065422--2 01/23/97 01007 008 ****575.00 ****575.00		
8. Name and Address of Current Registered Agent XAVIER J. FERNANDEZ 3491 GANDY BLVD NORTH PINELLAS, FL 33565		9. Name and Address of New Registered Agent Name PATTI R. HARDIN Street Address (P.O. Box Number is Not Acceptable) 1470 ROYAL PALM SQUARE BLVD. Suite, Apt. #, Etc. City FORT MYERS State FL Zip Code 33919			
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 Patti R. Hardin Date 1/14/97 REGISTERED AGENT MUST SIGN					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: K. S. Fairbain 186 Dec 96 01564772759 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

CR20040 (12/95)