

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

01 MAR 26 PM 1:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

H85570
Court House Investments, INC

2. Principal Office Address

4150 WESTFIELD RD

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

PENSACOLA

City & State

FL 32503

Zip

Country

32503

Zip

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

11/12/85

5. FEI Number

592593328

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

STEWART J. LOVE

700003932007-5

Street Address (P.O. Box Number is Not Acceptable)

4150 WESTFIELD ROAD

03/30/01 01088-011

***2161.25 ***2161.25

Suite, Apt. #, Etc.

City

PENSACOLA

State

FL

Zip Code

32503

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

**Signature of
Registered Agent**

Stewart J. Love

REGISTERED AGENT MUST SIGN

Date 3/26/01

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	STEWART J. LOVE	4150 WESTFIELD RD	PENSACOLA, FL 32503
V/D	LILIAN B. LOVE	4150 WESTFIELD RD	PENSACOLA, FL 32503

10. 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

Stewart J. Love

Date

3/26/01

Daytime Phone #

850-435-7737

CR2E081 (9/00)