

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 MAY -1 PM 12:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H86196

1. Corporation Name

SHIRLEY LAND COMPANY

REINSTATEMENT 96-03

2. Principal Office Address

3665 BEE RIDGE RD.

3. Mailing Office Address

3665 BEE RIDGE RD.

Suite, Apt. #, etc.

SUITE 300

Suite, Apt. #, etc.

SUITE 300

City & State

SARASOTA, FL

City & State

SARASOTA, FL

Zip

34233

Country

SARASOTA

Zip

34233

Country

SARASOTA

4. Date incorporated or Qualified
To Do Business in Florida

11/20/85

5. FEI Number

59-2635546

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

WAYNE F. SEITL

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

3665 BEE RIDGE RD.

Suite, Apt. #, Etc.

SUITE 300

City

SARASOTA

State

FL

Zip Code

34233

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

Date 4-17-03

REGISTERED AGENT MUST SIGN

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" Pres.	JEFFREY R. DONNELLY	3665 BEE RIDGE RD., #300	SARASOTA, FL 34233
"T" Treas.	JEFFREY R. DONNELLY	3665 BEE RIDGE RD., #300	SARASOTA, FL 34233
"S" Sec.	WAYNE F. SEITL	3665 BEE RIDGE RD., #300	SARASOTA, FL 34233

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:

JEFFREY R. DONNELLY

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/03

Date

(941) 954-5772

Daytime Phone #

CR2E081 (10/02)