

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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 OCT 31 PM 1:33

mtu  
10/31

DOCUMENT # J39434

1. Corporation Name

OLD WORLD TREASURE QUEST INC.

Principal Place of Business

4153 DOWLING RD  
MIDDLEBURG FL 32068  
US

Mailing Address

P O BOX 417  
MIDDLEBURG FL 32050  
US

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business In Florida

10/27/1986

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2740761

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PT	POPE, CHARLES D.	2648 HENLEY RD.	GREENLOVE SPGS. FL
VPS	POPIN, JOHN S.	1053 RIFLE RANGE RD., APT. 12-A	MT. PLEASANT SC
VPL	ELLIOTT, RALPH E.	3571 COUNTY RD 218 EAST	MIDDLEBURG FL

500002349595--0  
-11/17/97--01154--007  
\*\*\*750.00 \*\*\*750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

POPE, CHARLES D.  
4153 DOWLING RD  
MIDDLEBURG FL 32068-0417

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

Charles D. Pope

REGISTERED AGENT MUST SIGN

Date 28 OCT 97

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☐ No ☐

(See other side for information  
on intangible tax.)

12. 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:

Charles D. Pope Charles D. Pope  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

28 OCT 97  
Date

904-282-6279  
Daytime Phone #