

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

①

1997 OCT 30 PM 3:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K22005

1. Corporation Name

CASTLENORTH CORPORATION

Principal Place of Business

2141 W. CHURCH ST.
ORLANDO FL 32805

Mailing Address

200 ADMIRAL'S COVE BLVD
JUPITER FL 33477
US

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/21/1988

5. FEI Number

59-2886110

Applied For

Not Applicable

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
PDT	STERN, ROBERT N.	2141 W. CHURCH ST.	ORLANDO FL
S	MASHALL, TERRY	2141 W. CHURCH ST	ORLANDO FL
VP	MARSHALL, TERRY	2141 W. CHURCH ST	ORLANDO FL
V	THOMAS, JOHN	1041 N.E. 16TH STREET	OCALA FL
D	STERN, BORIS	3106 LAKE ELLEN DRIVE	TAMPA FL
D	WHITE, JOSEPH	6365 53RD STREET, N.	PINELLAS PARK FL

8. Name and Address of Current Registered Agent

STERN, ROBERT
2141 W. CHURCH ST.
ORLANDO FL 32805

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

600002349746--8

11/17/97-01159-011

***165.00 ***165.00

FL

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

REGISTERED AGENT MUST SIGN

Date 10-29-97

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)(l), 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

Date

Daytime Phone #

Robert N. Stern
ROBERT N. STERN

10-29-97

407
843-
6810

CR2E040 (8/97)

2

CastleNorth Corporation
2141 West Church Street
Orlando, Fl. 32805

Florida Dept of State
Division of Corporation
Annual Reports / Re-instatement Section
P.O. Box 6327
Tallahassee, Fl. 32314-6327

Attn: Stacy

Dear Stacy,

Per our conversation 10.29.97, I am enclosing \$165 to reinstate CastleNorth Corporation as a valid and active corporation in Florida. You will remember somehow the address in the state computer was changed and therefore our mail was delivered to Jupiter, Fl. at an address we never heard of. You instructed me to send in a note along with \$165.00 to your attention.

In addition, please make the change to our address.

Thank you in advance for your help.

Sincerely

Robert N. Stern
President

407-843-6810