

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 MAR 27 AM 10:27

DOCUMENT #

L04000016958

1. Corporation Name

Advanced Beach Holding Company, LLC

2. Principal Office Address - No P.O. Box #
63 N. Orlando Avenue

3. Mailing Office Address
63 N. Orlando Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Cocoa Beach, Florida

City & State
Cocoa Beach, Florida

Zip 32931 Country USA

Zip 32931 Country USA

700225671467
03/21/12--01023--020 **750.00

CR2E081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida 3/3/04

5. FEI Number 65-1229447

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
Glenn T. Sundin, Attorney

Street Address (P.O. Box Number is Not Acceptable)
335 South Plumosa Street, Suite A

Suite, Apt. #, Etc.
Suite A

City Merritt Island, State FL Zip Code 32952

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 Glenn T. Sundin
REGISTERED AGENT MUST SIGN

Date 3/16/12

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
Mgr	Douglas E. Green	63 N. Orlando Avenue	Cocoa Beach, Florida 32931
Mgr	Sheryl Green	63 N. Orlando Avenue	Cocoa Beach, Florida 32931

REINSTATEMENT 2010 - 2012

10. E-mail Address: sundintaxlawyer@gmail.com

(To be used for future annual report notification)

11. 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. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: Douglas E. Green
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 3/16/12 Daytime Phone #