

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
The Honorable  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 NOV -3 AM 11:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L10322

1. Corporation Name

JAMES I. MONTGOMERY REALTY, INC.

Principal Place of Business

525 EAST OLYMPIA AVENUE  
SUITE 7  
PUNTA GORDA FL 33950  
US

Mailing Address

525 EAST OLYPIA AVENUE  
SUITE 7  
PUNTA GORDA FL 33950  
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

08/21/1989

5. FEI Number

65-0215160

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	4. City / State / Zip
DPS	MONTGOMERY, JAMES I.	525 EAST OLYMPIA AVENUE SUITE #1	PUNTA GORDA FL
T	MONTGOMERY, JAMES I.	525 EAST OLYPIA AVENUE SUITE #1	PUNTA GORDA FL

100003046231--0  
-11/16/99--01090--005  
\*\*\*150.00 \*\*\*150.00

8. Name and Address of Current Registered Agent

MONTGOMERY, JAMES I.  
525 EAST OLYMPIA AVENUE  
~~SUITE #~~ Suite #7  
PUNTA GORDA FL 33950

9. Name and Address of New Registered Agent

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

James I. Montgomery

REGISTERED AGENT MUST SIGN

Date 10-29

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., that all taxes 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 furnished on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

James I. Montgomery

James I. Montgomery

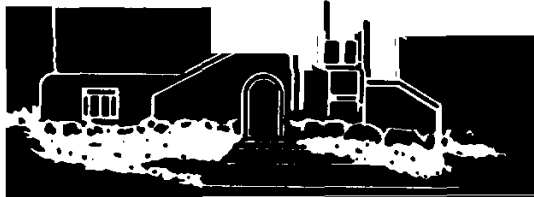
Date

10-29

Daytime Phone #

941.575-2800

CR2E040 (8/99)



## Southwest Construction of Florida, Inc.

525 EAST OLYMPIA AVENUE • SUITE #1  
PUNTA GORDA, FLORIDA 33950  
TELEPHONE: (941) 575-2800 • 800-881-2003 • FAX: (941) 575-2523  
CGC016693

October 29, 1999

Division Of Corporations  
Reinstatement Section  
P.O. Box 6327  
Tallahassee, Fl. 32314-6327

Re: Document # L10322

To whom it may concern,

This is the first notice I have seen, I did receive one for Southwest Construction Of Fl., Inc. and paid it in February. I was a new employee at the time and did not realize that Jim Montgomery also had James I. Montgomery Reality, therefore I wasn't looking for anything regarding the reality end of the business.

I noticed that on the document you sent me the address has Suite #1 on it and the suite we are in is Suite # 7. Maybe that is why I have not received anything this year.

I am sending the original amount of \$150.00 for the annual report and if that is not acceptable please let me know as soon as possible because we do not need to be lapsed any longer.

Thank you,

Perri Shelton  
Office Manager  
Southwest Construction Of Fl., Inc.