

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
2000 UBR



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

00 NOV 15 PM 12:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L29335

1. Corporation Name

MONTURA ESTATES, INC.

Principal Place of Business

70 S.E. 4TH AVE.  
DELRAY BEACH FL 33483  
US

Mailing Address

70 S.E. 4TH AVE.  
DELRAY BEACH FL 33483  
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

11/09/1989

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0162210

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	CAMPBELL, DOAK S III	70 S.E. 4TH AVENUE	DELRAY BEACH FL 33483

900003505719--0  
-12/19/00--01052--018 I  
\*\*\*150.00 \*\*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

NATIONAL REGISTERED AGENTS INC  
501 BRICKELL KEY DRIVE  
STE. 602  
MIAMI, FL 33131

Name

DOAK S. CAMPBELL III

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

70 SE 4th AVE

Suite, Apt. #, Etc.

City

DELRAY BEACH

State

FL

Zip Code

33483

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

DOAK S. CAMPBELL III  
REGISTERED AGENT MUST SIGN

Date 08/23/00

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 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:

DOAK S. CAMPBELL III  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

08/23/00

Daytime Phone #

361 278 1890

CR2E040 (8/00)

202

**Doak S. Campbell, III**  
ATTORNEY AT LAW  
70 SE FOURTH AVENUE  
DELRAY BEACH, FLORIDA 33483

TELEPHONE  
561/278-1890

FAX NUMBER  
561/276-5803

November 13, 2000

Florida Department of State  
Division of Corporations  
Re-instatement Office  
PO Box 6327  
Tallahassee, Fl 32314

Re: Montura Estates, Inc.

Ladies/Gentlemen:

I understand that James Whisenand, principal of the above referenced company, contact your office about the dissolution of the corporation. We never received the original renewal notice. We understand from our telephone conversation that the Post Office returned the original renewal notice as "undeliverable" despite it having the correct address. According to your representative, we were instructed to complete the form, include a check for \$150 and provide this letter.

With these submissions, it is my understanding that Montura Estates, Inc. will be reinstated and will be in good standing. Please confirm receipt of this material and the reinstatement. Thank you for your assistance.

Sincerely,



Doak S. Campbell, III