

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

98 JAN 12 PM 4:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L76446**

1. Corporation Name

BAY VILLA REALTY, INC.

Principal Place of Business

100 WEST KENNEDY BLVD
SUITE 720
TAMPA FL 33602
US

Mailing Address

100 WEST KENNEDY BLVD
SUITE 720
TAMPA FL 33602
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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/01/1990

5. FEI Number

59-3032425

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	HOWELL, DANIEL B	100 WEST KENNEDY BLVD, SUITE 720	TAMPA FL
D	AZZARELLI, THOMAS J	100 WEST KENNEDY BLVD, SUITE 720	TAMPA FL
			400002402114--5 -01/15/98--01103--003 ****150.00 ****150.00
			400002402114--5 -01/15/98--01103--004 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

AZZARELLI, THOMAS J.
100 WEST KENNEDY BLVD
SUITE 720
TAMPA FL 33602

9. Name and Address of New Registered Agent

Name

Howell, Daniel B.

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

100 West Kennedy #720

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33602

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

[Signature]

REGISTERED AGENT MUST SIGN

Date December 4, 1997

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]
D. Howell

Date

Dec 4, 1997

Daytime Phone #

(813)
222 3400

CR2E040 (8/97)