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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE
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L98000000415

FILED

03 OCT 24 PM 1:42

1. DOCUMENT # L98000000415

Name and Mailing Address

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0017213 01 FP 0.352 **PRSR T3 0 0615 32459

WATSON LAND, L.L.C.
5365 E. HWY 30-A STE 105
SEAGROVE BEACH FL 32459

2. New Mailing Address		4. State/Country of Formation FL	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 03/27/1998	
Principal Place of Business 5365 E. HWY 30-A STE 105 SEAGROVE BEACH FL 32459	3. New Principal Place of Business Address City, State, Zip	6. FEI Number 59-3514669	Applied For Not Applicable
8. Name and Address of Current Registered Agent WATSON, FRANKLIN H P.A. 381 PITTS BAYSHORE DRIVE FREEPORT FL 32439		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	
9. Name and Address of New Registered Agent		10. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.	
Name		Date 10-20-03	
Street Address (P.O. Box Number is Not Acceptable)		11. Names and Street Addresses of Each Managing Member/Manager	
City		12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.	

CR2E084 (7/03)

Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	WATSON, FRANKLIN H	5365 E. HWY 30-A	SEAGROVE BEACH FL 32439
MGR	WATSON, LYNN H	5365 E. HWY 30-A STE 105	SEAGROVE BEACH FL 32459
MGR	WATSON, CHRISTOPHER H	5365 E. HWY 30-A STE 105	SEAGROVE BEACH FL 32459
REINSTATEMENT			
Signature of Managing Member/Manager			
Date 10-20-03 Daytime Phone # 850 231 3472			
Typed or printed name of signing Managing Member/Manager			