

L98000002906

APPLICATION FOR
REINSTATEMENT FOR
LIMITED LIABILITY COMPANY



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 SEP 29 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address
of Limited Liability Company

DOCUMENT # L98000002906

LOCKWOOD DEVELOPMENT, LLC

435 L'Ambiance Drive
Longboat Key, Florida 34228

1a. Principal Place of Business Address

435 L'Ambiance Drive
Longboat Key, Florida 34228

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business

2a. Mailing Address

3. Date Organized or Qualified

3a. State of Formation

11/30/98

Florida

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

☐ Applied For

City & State

City & State

65-0918056

☐ Not Applicable

Zip

Country

Zip

Country

5. Date of Last Report

6. Certificate of Status Desired

None filed

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent

Robert W. Browning, Jr.
1800 Second Street, Suite 880
Sarasota, Florida 34236

Name

David M. Silberstein

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

720 South Orange Avenue

Suite, Apt. #, etc.

City

Sarasota,

Zip Code

FL

34236

9. 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.

Signature of
Registered Agent

Date

9/25/00

REGISTERED AGENT MUST SIGN

10. Title

Managing Members/Managers

Business Street Address

City, State & Zip Code

Mgr. Gayle L. Hannett

435 L'Ambiance Drive

Longboat Key, FL 34228

Mgr. John L. Hannett

435 L'Ambiance Drive

Longboat Key, FL 34228

000003415930--1
-10/05/00--01122--006
****400.00 ****200.00

11. 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.

Signature of
Managing Member/Manager

Date

Daytime Phone # 248/646-6200

Typed or printed name of signing Managing Member/Manager

John L. Hannett