

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JAN 26 AM 8:00

DOCUMENT # **M82009**

1. Corporation Name

GLADES MUSIC OF SOUTH FLORIDA, INC.

REINSTATEMENT 03-04

2. Principal Office Address

2057 VISTA DRIVE

Suite, Apt. #, etc.

3. Mailing Office Address

(SAME)

Suite, Apt. #, etc.

City & State

NO. PALM BEACH, FL

City & State

Zip

33408

Country

U.S.

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/23/88

5. FEI Number

650058703

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

THOMAS W. BIRD, JR.

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

2062 VISTA DRIVE

Suite, Apt. #, Etc.

City

NO. PALM BEACH

State
FL

Zip Code

33408

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Thomas W. Bird, Jr.

REGISTERED AGENT MUST SIGN

Date

01/15/04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	THOMAS W. BIRD, JR.	2062 VISTA DRIVE	NO. PALM BEACH, FL 33408
ST	DIANNE H. BIRD	2062 VISTA DRIVE	NO. PALM BEACH, FL 33408

10. 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

Dianne H. Bird

(DIANNE H. BIRD)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/15/04

Date

(561) 799-6452

Daytime Phone #

CR2E081 (10/02)

282

Glades Music of South Florida, Inc.

2057 Vista Drive
North Palm Beach, FL 33408
Phone (863)824-0700 Fax (561)776-3757

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

January 15, 2004

To Whom It May Concern:

Per my conversation with a representative of your office earlier this morning, I am enclosing a check for \$300.00 (ck#8305) and the downloaded 'Corporation Reinstatement' form in order to return my corporation status to 'active'. I advised your representative that I had not received the 2003 report via mail and thus had not filed it. (Note there has also been a change of mailing address this year.) Please waive the \$600.00 reinstatement fee and accept this check as payment for 2003 / 2004. Thank you in advance for your assistance in clearing up this matter. If you have any questions please do not hesitate to contact me at (561) 261-9800. Thank you again.

Sincerely,



Dianne H. Bird