

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 MAY 13 AM 7:38

DOCUMENT # N05000011519

1. Corporation Name

Seagrass Flats Condominium Assoc. Inc.

2. Principal Office Address - No P.O. Box #

3001 Gulf Drive

Suite, Apt. #, etc.

City & State

Holmes Beach FL

Zip

34217

Country

USA

3. Mailing Office Address

3001 Gulf Drive

Suite, Apt. #, etc.

City & State

Holmes Beach FL

Zip

34217

Country

USA

800180877028  
05/14/10--01003--001 \*\*61.25

**REINSTATEMENT** 08-10

4. Date Incorporated or Qualified  
To Do Business in Florida

11-14-05

5. FEI Number

203843382

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

Barry Gould

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

46 IVP 3001 GULF DRIVE

Suite, Apt. #, Etc.

City

Holmes Beach

State

FL

Zip Code

34217

PROFIT CORPORATIONS ONLY

☐ The \$600.00 reinstatement fee is imposed,  
except in circumstances which the entity did  
not receive the prior notices. By checking  
this box, you are certifying the prior  
notices were not received and requesting  
the reinstatement fee be waived.

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

Barry Gould

Date 4-27-10

REGISTERED AGENT MUST SIGN

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
D	Robert Miller	803 North Shore Dr.	Anna Maria, FL 34116
D	Mike Delisle	741 South Perkins Rd.	Memphis, TN 38117
D	Janet Miller	803 North Shore Dr.	Anna Maria, FL 34217

05/04/10 01052 021  
\$297.50

10. E-mail Address: barry@realtorgould.com

(To be used for future annual report notification)

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. I further certify, 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:

\* R Miller