

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 FEB 1 PM 4:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N9600000599**

1. Corporation Name

**Golden Lantern Homeowners
Association, INC.**

2. Principal Office Address

**7950 PK BLVD #112
Pinellas Park FL 33781**

3. Mailing Office Address

**7950 PK BLVD #112
Pinellas Park FL 33781**

Suite, Apt. #, etc.

#112

Suite, Apt. #, etc.

#112

City & State

Pinellas Park, FL

City & State

Pinellas Park FL

Zip **33781**

Country

USA

Zip **33781**

Country

USA

REINSTATEMENT

99-05

4. Date Incorporated or Qualified
To Do Business in Florida

11/1/96

5. FEI Number

593428339

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

Charles P Plancon

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

7950 PK BLVD

Suite, Apt. #, Etc.

#112

City

Pinellas Park

State
FL

Zip Code

33781

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

Charles P Plancon

Date **1-28-05**

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
P/D	Charles Plancon	7950 PK BLVD #112	Pinellas Park FL
V/P	Elenore McEachen	7950 PK BLVD #122	Pinellas Park FL
T	Sandra Short	7950 PK BLVD #141	Pinellas Park FL
S	Josephine Todd	7950 PK BLVD #96	Pinellas Park FL
D	Rose Wallace	7950 PK BLVD #21	Pinellas Park FL
D	Bob Peachey	7950 PK BLVD #9	Pinellas Park FL

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:

Charles P Plancon

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-28-05 727-224-0706

Date

Daytime Phone #

CR2E081 (01/05)