

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

99 NOV -1 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N97000000393

1. Corporation Name

SOUTHERN VETERANS OF THE PANHANDLE, INC.

Principal Place of Business

4530 BAYWOODS DRIVE
PENSACOLA FL 32504

Mailing Address

4530 BAYWOODS DRIVE
PENSACOLA FL 32504

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/24/1997

5. FEI Number

59-3421863

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	VANDEVER, JAMES H	4530 BAYWOODS DR	PENSACOLA FL 32504
PD	DUBOSE, PAUL PERRY	4530 BAYWOODS DRIVE	PENSACOLA FL 32504
D	GREEN, JOHN EDWARD	4530 BAYWOODS DRIVE	PENSACOLA FL 32504
VD	MIKE CERRO	4530 BAYWOODS Drive	Pensacola Fl. 32504
ST	Don Howell	1280 Mahogany Mill Rd. #13	Pensacola Fl. 32507

8. Name and Address of Current Registered Agent

VANDEVER, JAMES H.
4530 BAYWOODS DR
PENSACOLA FL 32504

9. Name and Address of New Registered Agent

Name Don Howell

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

1280 Mahogany Mill Rd.

Suite, Apt. #, Etc.

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City Pensacola

State FL

Zip Code 32507

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Don L. Howell

REGISTERED AGENT MUST SIGN

Date 26 Oct 99

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 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.

KE

SIGNATURE:

Don L. Howell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Don L. Howell

26 Oct 99 (850) 458-0457

Date


Daytime Phone #

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Don L. Lowell
1280 Mahogany Mill Rd.
Pensacola, Fl. 32507
VNV/MC

Dear Sirs,

Document # N97000000393, FEI # 59-342-1863 has been modified to reflect the proper officers and titles. Our check for \$61.25 was cashed by your firm in May 1999, so please wavier any fines or penalties. If any further problems exist, please contact me at (850) 458-0457.

Thank You,

Don L. Lowell
VNV/MC Treasurer / Secretary