

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2007 JUL 26 AM 8:19

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # N98000004120

1. Corporation Name

Bannerman Road Commercial Owners Association, Inc.

REINSTATEMENT

CR2E081 (1/07)

03-07

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

1435 E. Piedmont Drive

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tallahassee, FL

City & State

Zip

32308

Country

FL

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/16/1998

5. FEI Number

59-3676852

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
Larry G. Elliott

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

1435 E. Piedmont Drive

Suite, Apt. #, Etc.

City
Tallahassee

State
FL

Zip Code

32308

☒ The 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.

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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

Larry G. Elliott

REGISTERED AGENT MUST SIGN

Date

7-25-07

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
Pres.	Larry G. Elliott	1435 E. Piedmont Drive	Tallahassee, FL 32308
D	Ron Hicks	1435 E. Piedmont Drive	Tallahassee, FL 32308
D	Mickey Harvey	1435 E. Piedmont Drive	Tallahassee, FL 32308
Sec.	Michelle Fox	1435 E. Piedmont Drive	Tallahassee, FL 32308

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 contained in Chapter 119, 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:

Larry G. Elliott
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7-25-07

(850) 668-2008

Daytime Phone #