

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR -6 AM 8:13

DOCUMENT # N98000006594

1. Corporation Name

BAYOU GRANDE LANDING HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

104 CYPRESS POINT EAST
PENSACOLA FL 32514

104 CYPRESS POINT EAST
PENSACOLA FL 32514



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

2. New Principal Office Address, If Applicable

748 Landing Lane
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

748 Landing Lane
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

11/19/1998

5. FEI Number

59-358-6996

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
PD	HIGDON, SHIRLEY M	6701 BAY FOREST DRIVE	PENSACOLA FL 32508
VD	HARRIS, ANDREW T	8991 GERALD ROAD	PENSACOLA FL 32507
STD	HIGDON, CHARLES R IV	104 CYPRESS POINT EAST	PENSACOLA FL 32514
PD	Marco Stolfi	748 Landing Lane	Pensacola, FL 32507
VD	Tim Gibbons	1155 Bloodworth LN	Pensacola, FL 32504
STD	Andrew Harris	7795 Grundy St.	Pensacola, FL 32507

8. Name and Address of Current Registered Agent

HIGDON, CHARLES R IV
104 CYPRESS POINT EAST
PENSACOLA FL 32514

9. Name and Address of New Registered Agent

Name

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

748 Landing Lane
Suite, Apt. #, Etc.

City
Pensacola

6000003164546--2

03/09/00 State 01106-005

***297.50 ***297.50

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

Signature of Marco Stolfi
REGISTERED AGENT MUST SIGN

Date 2-1-00

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.

SIGNATURE:

Signature of Marco Stolfi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-1-00 880-516-4188