PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA 01 AUG 16 PH 4: 00 1. Corporation Name 500004562505--5 -08/29/01--01086--003 ****300.00 ****300.00 Advanced Land Development, Inc 2. Principal Office Address 3. Mailing Office Address P.O. BOX 1325 1001 Worthington Ave Suite, Apt. #, etc. Suite, Apt. #, etc. 4. Date incorporated or Qualified To Do Business in Florida No 1100 City & State City & State Applied For 5. FEI Number Coreen Cove Soringo Green C 50000 Not Applicable <u>59 3617790</u> \$8.75 Additional Fee require for a Certificate of Status CERTIFICATE OF STATUS DESIRED ಎಂ५३ 7. Name and Address of Current Registered Agent Brian Weltzbarker Street Address (P.O. Box Number is Not Acceptable) 1001 Worthington Ave Suite, Apt. #, Etc. Zip Code City FL 32043 Cove Spains CRZE081 (9/00) 8. 1, 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 6/20/0 Registered Agent 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director Name of Officers and/or Directors City / State / Zip 3700 State Rd 16 W Green Cae Springs 7c 32al3 PVTSBryan D Weltzbarker SP 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 per and accurate, and my signature shall have the same legal effect as if made under oath. SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 964-213-0133