

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION REINSTATEMENT**

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

**DOCUMENT #** P00000002578

**1. Corporation Name**  
STEPHANIE L BISSETT PA

**2. Principal Office Address**  
713 SW 47TH TERR  
Suite, Apt. #, etc.  
201 B  
City & State  
CAPE CORAL FL  
Zip  
33914  
Country  
LEE

**3. Mailing Office Address**  
713 SW 47TH TERR  
Suite, Apt. #, etc.  
201 B  
City & State  
CAPE CORAL FL  
Zip  
33914  
Country  
LEE

**FILED**  
02 APR 29 PM 12:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

100005556021--2  
-05/17/02--01004--019  
\*\*\*\*300.00 \*\*\*\*300.00

**4. Date Incorporated or Qualified To Do Business in Florida** 1/3/2000

**5. FEI Number** 650978406  
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  
STEPHANIE L BISSETT

Street Address (P.O. Box Number is Not Acceptable)  
713 SW 47TH TERR

Suite, Apt. #, Etc.  
201 B

City  
CAPE CORAL

State  
FL

Zip Code  
33914

**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 Stephanie L Bissett Date 3/22/02

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
D	Stephanie L Bissett	713 SW 47th Terrace # 201 B	Cape Coral, FL 33914

**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 of 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: Stephanie L Bissett Date 4/1/02 (239) 292-3707

SIGNATURE, AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E081 (9/01)

**Tudor Villas Realty Corp.**

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Stephanie L. Bissett PA  
713 S.W. 47th Terr Suite 201B  
Cape Coral, FL 33914  
Lee

Phone 941-549-7400 office 292-3707 cellular  
Fax 941-549-6540  
Email ssellingparadise@aol.com

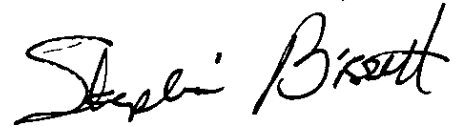
March 22, 2002

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir/Madam,

I have enclosed my Corporation Reinstatement form for renewal.  
I never received the renewal letter by mail, and was told it had been returned to the state via the post office.  
Therefore the late fee's had been waived Please find enclosed a check for \$300.00 for the necessary reinstatement.

Sincerely,



Stephanie L. Bissett