

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 OCT 31 PM 4:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000114412

1. Corporation Name

NORTH SOUTH HOLDINGS CORPORATION OF SOUTH FLORIDA
A

Principal Place of Business

12491 EAGLE RD.
CAPE CORAL FL 33909

Mailing Address

12491 EAGLE RD.
CAPE CORAL FL 33909



REINSTATEMENT 02

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

01/01/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

651060520

Not Applicable

Zip

Country

Zip

Country

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P-T	Stephen O'Meara	12491 Eagle Rd	Cape Coral FL 33909
V-S	Dary O'Meara	12491 Eagle Rd	Cape Coral FL 33909

8. Name and Address of Current Registered Agent

O'MEARA, STEPHEN H
12491 EAGLE RD.
CAPE CORAL FL 33909

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

CR2E040 (8/02)

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. or 617.0505, F.S.

Signature of
Registered Agent

Stephen O'Meara
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 10/29/02

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:

Stephen O'Meara
SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/29/02
Date

239-874-7046
Daytime Phone #

Attachment

Parrish, White, Lawhon & Adler, P.A.
ATTORNEYS AT LAW

JON D. PARRISH
JOHN P. WHITE
ANTHONY M. LAWHON



NATHAN J. ADLER
FLOYD S. YARNELL
DAVID H. ROSENBERG

PO00001194112

July 26, 2002

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Dear Sir/Madam:

The purpose of this letter is to request that you waive the reinstatement fee for the above referenced corporation. During the past few months I have been attempting to transfer my clients from Ft. Myers to Naples. The UBR in question was dropped off by my client and somehow misplaced during the move.

Please accept the enclosed check for \$150.00 for the filing of the UBR. If you have any questions or require any further information, please call.

Sincerely,

Nathan J. Adler, Esq.

NJA/blc

Enclosures

O:\NJA Client Files\O'Meara, Stephen North So. Corp\072602.UBR\tr.wpd