

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 DEC -5 AM 9:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000063395**

1. Corporation Name

**GSJ PROPERTIES, INC.**

Principal Place of Business

1701 WEST WATROUS AVENUE  
TAMPA FL 33606

Mailing Address

1701 WEST WATROUS AVENUE  
TAMPA FL 33606

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

06/26/2001

5. FEI Number

59-3730144

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	GOLDIE W. SHEAR	1404 S. Desoto Ave.	Tampa, FL 33606
S	JEFFREY T. SHEAR	1701 W. WATROUS AVE.	TAMPA, FL 33606
T	STEPHEN C. SHEAR	"	200009370272 12/05/02--01011--013 **150.00

8. Name and Address of Current Registered Agent

SHEAR, GOLDIE W  
1404 SOUTH DESOTO AVENUE  
TAMPA FL 33606

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

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

*GOLDIE W. SHEAR* **REQUIRED**

REGISTERED AGENT MUST SIGN

Date 11/11/02

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:

*JEFFREY T. SHEAR* **SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/11/02

813-222-6653

CR2E040 (8/02)

November 27, 2002

Department of State  
Divisions of Corporation  
P. O. Box 6327  
Tallahassee, FL 32314

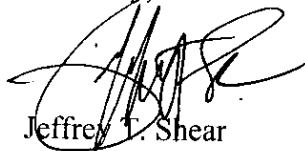
Re: GSJ Properties, Inc. reinstatement

To Whom It May Concern:

As registered agent for GSJ Properties, Inc., I received in the mail a Notice of Administrative Dissolution or Revocation which requires a \$600.00 reinstatement fee. I spoke to a Department of Revenue employee and explained to them that I have not received the initial document that is normally sent out for the annual report. I was told by the Department of Revenue employee that if I wrote this letter regarding my not receiving the initial mailing that I could be reinstated and pay only the normal annual report fee of \$150.00.

Therefore, attached hereto is my application for reinstatement along with a \$150.00 check for my annual report fee. If you have any questions or if this was handled incorrectly, please do not hesitate to contact me at (813) 222-6653. Thank you very much for your cooperation.

Sincerely,



Jeffrey T. Shear