

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 MAR 16 AM 7:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000013603**

1. Corporation Name

South East Land Development Consultants, Inc

2. Principal Office Address

3 South Second Street

Suite, Apt. #, etc.

Suite 202

City & State

Fernandina Beach, FLA.

Zip

32034

Country

USA

3. Mailing Office Address

2334 East State Rd. 200

Suite, Apt. #, etc.

Suite 300

City & State

Fernandina Beach, FLA.

Zip

32034

Country

USA

REINSTATEMENT 03-04

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

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

Pascal Gilley, Jr

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

432 Beachside Place

Suite, Apt. #, Etc.

City

Fernandina Beach

State

FL

Zip Code

32034

200030508282
03/16/04 01025 028 **900.00

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

Pascal Gilley, Jr

REGISTERED AGENT MUST SIGN

Date

3-12-04

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
President	Pascal Gilley, Jr.	432 Beachside Place	Fernandina Beach, FLA. 32034
Secretary	Sue T. Gilley	432 Beachside Place	" " " "

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 true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Pascal Gilley, Jr

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3-12-04

Daytime Phone #

CR2E081 (01/04)