

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 15 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000056688**

1. Corporation Name

PALM PARADISE, INC.

Principal Place of Business

Mailing Address

**1115 SUNSET LANE
GULF BREEZE FL 32563**

**1115 SUNSET LANE
GULF BREEZE FL 32563**

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

3219 Gulf Breeze Parkway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Gulf Breeze, FL

City & State

Zip
32563

Country
U.S.A.

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/21/2002

5. FEI Number

04-3674234

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
DP	MONCREIFF, STEVEN D	1115 SUNSET LANE	GULF BREEZE FL 32563
DS	MONCREIFF, REBECCA ANN	1115 SUNSET LANE	GULF BREEZE FL 32563

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**MONCREIFF, STEVEN D
1115 SUNSET LANE
GULF BREEZE FL 32563**

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

SIGNATURE

Date

REGISTERED AGENT MUST SIGN

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:

SIGNATURE

Steven D. Moncreiff, Pres.

Date

Daytime Phone #

CR2E040 (7/03)

October 10, 2003

Request for Reinstatement of Corporation

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

US Mail Certified

7003 1010 0001 5233 4114

Dear Glenda E. Hood:

PALM PARADISE, INC. OF GULF BREEZE, FL

Enclosed, please find one (1) executed Application for Reinstatement for the corporation, Palm Paradise, Inc. of Gulf Breeze, FL.

Today, was instructed to return the application signed and with a letter stating the filing fee has already been paid, a copy of the canceled check and copies of the prior letters. I was told that the \$400.00 late would be waived and Palm Paradise, Inc. would be reinstated.

Enclosed, as requested, are copies of original letter dated July 7, 2003 and follow up letter dated August 7, 2003, requesting the late fee waiver and filing of Palm paradise, Inc. Annual Report and copy of cancelled check #1484 in the amount of \$158.75.

Thank you for accepting the filing and reinstatement of Palm Paradise, Inc.

Respectfully,

Palm Paradise, Inc.

Steven D Moncreiff
President

July 7, 2003

Uniform Business Report

Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Dear Division of Corporations,

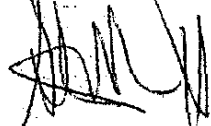
PALM PARADISE, INC.

Please allow this letter to serve as my statement that Palm Paradise, Inc. did not receive a prior notice for the filing of the Uniform Business Report. It is my request that the late fee be waived.

Attached is Palm Paradise, Inc. check # 1484, in the amount of \$158.75 (\$150.00 UBR filing fee and \$8.75 for Certificate of Status fee) for 2003.

Thank you for your assistance in this matter.

Respectfully,



Steven D Moncreiff