

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1082

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

05 FEB -9 PM 3:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000094162

1. Corporation Name

Northside Southside, Inc.

2. Principal Office Address

City TAVERN

3. Mailing Office Address

City TAVERN

Suite, Apt. #, etc.

2206 BAY ST

Suite, Apt. #, etc.

2206 BAY ST.

City & State

Ft. Myers, FL

City & State

Ft. Myers, FL

Zip

33901

Country

US

Zip

33901

Country

US

REINSTATEMENT

03-05

4. Date Incorporated or Qualified  
To Do Business in Florida

8-29-2002

5. FEI Number

55-0795840

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

Michael Byrnes

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

2206 BAY ST.

Suite, Apt. #, Etc.

City

Ft. Myers

State

FL

Zip Code

33901

200046654002  
02/15/05 01043-015 \*\*\*450.00

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

Michael Byrnes

Date 2-5-05

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
P	Haight, Cheryl	780 Harmon Blvd.	Hoffman Estates, IL 60144
U	Haight, James	1901 Clifford St	Ft. Myers, FL 33912
V	Byrnes, Michael	2206 BAY ST.	Ft. Myers, FL 33901

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:

Michael Byrnes

2-5-05

Date

Daytime Phone #

CR2E081 (01/05)

20f2

NOTHSIDE SOUTHSIDE, INC.  
2206 Bay St.  
Ft. Myers, Fl 33901

Re: P02000094162

Dear Sirs:

This letter is to ask for reinstatement of my corporation as I did not receive notice for renewal. I have enclosed a check for \$450. This is for three years Please waive the reinstatement fee.

Sincerely,

A handwritten signature in cursive script that reads "Michael Bynes". The signature is written in dark ink and is positioned above the printed name.

Michael Bynes