

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **P02000130315**

1. Corporation Name

BAKER INVESTMENT PROPERTIES, INC.

Principal Place of Business

Mailing Address

5685 SE AULT AVENUE
STUART FL 34997

5685 SE AULT AVENUE
STUART FL 34997

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/10/2002

5. FEI Number

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
DP	BAKER, MICHELLE	5685 SE AULT AVENUE	STUART FL 34997

800025403858
12/10/03--01079--002 **158.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BAKER, MICHELLE
5685 SE AULT AVENUE
STUART FL 34997

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

Michelle Baker

REGISTERED AGENT MUST SIGN

Date

12-8-03

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:

Michelle Baker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-8-03

Date

Daytime Phone #

772-215-3809

FILED

03 DEC 10 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 03

CR2E040 (7/03)

December 9, 2003

To Whom It Concerns,

RE: Baker Investment Properties, Inc.
Document #: P02000130315

On December 18th of last year, my husband's mother unexpectedly past away and left a huge estate to be sorted. We packed up the family and made a temporary move to Illinois. We just returned this October.

Our mail was forwarded to his mother's house in Neoga, Illinois, however I am finding that many pieces (including the UBR notices) were never received. Enclosed is our reinstatement fee and application. Thank you for your understanding and cooperation.

Sincerely,

A handwritten signature in cursive script that reads "Michelle Baker". The signature is written in dark ink and is positioned below the word "Sincerely,".

Michelle Baker