

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION  
FOR  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #P94000033320**

1. Corporation Name **Apollo Real Estate Investments, Inc.**  
**464 Jewel Court**  
**Belleair Bluffs, Florida 33770**

Principal Place of Business Mailing Address  
**464 Jewel Court**  
**Belleair Bluffs, FL 33770**

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

|                                                              |         |                                              |         |
|--------------------------------------------------------------|---------|----------------------------------------------|---------|
| 2. New Principal Office Address, If Applicable<br><b>N/A</b> |         | 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

**May 2, 1994**

5. FEI Number

**218-24-6653**

6. CERTIFICATE OF STATUS DESIRED ☐

Applied For  
Not Applicable

**\$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<br>Title(s) | 2<br>Name of Officers<br>and/or Directors | 3<br>Street Address of Each<br>Officer and/or Director<br>(Do NOT Use Post Office Box Numbers) | 4<br>City / State / Zip           |
|---------------|-------------------------------------------|------------------------------------------------------------------------------------------------|-----------------------------------|
| Pres/D        | Gerald B. Hubbell                         | 464 Jewel Court<br>Belleair Bluffs, Florida 33770                                              | Belleair Bluffs, Florida<br>33770 |
| Sec/T         | Stella M. Hubbell                         | 464 Jewel Court                                                                                | Belleair Bluffs, FL. 33770        |
| Dir.          | Gerald C. Hubbell                         | 422 Woodlawn                                                                                   | Clearwater, Florida 33756         |
|               |                                           |                                                                                                |                                   |
|               |                                           |                                                                                                |                                   |

95-99

TS, 3/11/99

**REINSTATEMENT**

8. Name and Address of Current Registered Agent

**Vaillancourt-Borgersen**  
**2350 West Bay Drive**  
**Largo, Florida 33770**

9. Name and Address of New Registered Agent

Name  
**Gerald B. Hubbell**  
Street Address (P.O. Box Number is Not Acceptable)  
**464 Jewel Court**  
Suite, Apt #, Etc.

City  
**Belleair Bluffs,** State  
**FL** Zip Code  
**33770**

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.

Signature of Registered Agent **Gerald B. Hubbell**  
*Gerald B. Hubbell*  
REGISTERED AGENT MUST SIGN

Date **March 3, 1999**

11. This corporation owes the current year  
Intangible Personal Property Tax due June 30.

Yes ☒ No ☐

(See other side for information  
on intangible tax.)

12. 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 119.02(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: **Gerald B. Hubbell, President**  
*Gerald B. Hubbell*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/99

727-532-0099

Date Daytime Phone

CDSE001-2-98