PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED AND FILED

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996 DEC -9 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000055322

1. Corporation Name

GREG PAGE AND ASSOCIATES, INC.

300002025743--9
-12/11/96--01025--034
****138.75 ****138.75

Principal Place of Business	Mailing Address
1855 WELLS RD #8 ORANGE PARK FL 32073	1855 WELLS RD #8 ORANGE PARK FL 32073

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
12995 S. Cleveland Ave	
Suite, Apt. #, etc.: SUITE 164	Suite, Apt. #, etc.: SAME
City & State: FT MYERS FLORIDA	City & State:
Zip: 33907 Country: USA	Zip: Country:

4. Date Incorporated or Qualified To Do Business in Florida: 07/14/1995

5. FEI Number: 59-3228767 ☐ 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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	PAGE, GREGORY T	1855 WELLS RD #8	ORANGE PARK FL 32073

300002025743--9
-12/11/96--01025--033
****236.25 ****236.25

REINSTATEMENT

300002025743--9
-12/11/96--01025--035
******8.75 ******8.75

8. Name and Address of Current Registered Agent

JONES, TERRANCE A
769 BLANDING BLVD
ORANGE PARK FL 32065

9. Name and Address of New Registered Agent

Name: GREGORY T. PAGE
Street Address (P.O. Box Number is Not Acceptable): 12995 S. Cleveland Ave
Suite, Apt. #, Etc.: Suite 164
City: FT MYERS State: FL Zip Code: 33907

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: Gregory T. Page SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN
Date: 11-26-97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. 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 119.07(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: Gregory T. Page SIGNATURE REQUIRED 11-26-96 941 936 5800 x277
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
GREGORY T. PAGE
Date Daytime Phone #

CR2E040 (7/96)

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