

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # P95000071642

1. Corporation Name

MONTGOMERY ROAD ACQUISITIONS, INC.

Principal Place of Business

920 LINCOLN CIRCLE
SUITE 760
WINTER PARK FL 32789
US

Mailing Address

920 LINCOLN CIRCLE
SUITE 760
WINTER PARK FL 32789
US

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

2. New Principal Office Address, If Applicable

807 S Orlando Ave
Suite, Apt. #, etc.
Suite C
City & State
Winter Park, FL
Zip Country
32789 US

3. New Mailing Office Address, If Applicable

P.O. Box 1046
Suite, Apt. #, etc.
City & State
Winter Park, FL
Zip Country
32790 US

4. Date Incorporated or Qualified
To Do Business in Florida

09/15/1995

5. FEI Number

59-3385931

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	HUCKEBA, JAMES C	920 LINCOLN CIR- 807 S Orlando Ave Suite C	WINTER PARK FL 32789

100002375711-4

-12/17/97-01108-009

****750.00 ****750.00

8. Name and Address of Current Registered Agent

WHITE, ROBERT B JR
201 S ORANGE AVE
SUITE 1000
ORLANDO FL 32801

9. Name and Address of New Registered Agent

Name
James C Huckeba
Street Address (P.O. Box Number is Not Acceptable)
807 S Orlando Ave
Suite, Apt. #, Etc.
Suite C
City
Winter Park

State Zip Code

FL 32789

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

REGISTERED AGENT MUST SIGN

Date 11/11/97

11. This corporation owes or has paid 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 119.07(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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/11/97
Date

407-741-9136
Daytime Phone