

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

1997 DEC 10 AM 9:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000035477

1. Corporation Name

GARRETT INVESTMENT PROPERTIES, INC.

Principal Place of Business

~~8432 MISSION BAY BOULEVARD~~

~~33880-3116~~

Mailing Address

~~8432 MISSION BAY BOULEVARD~~

~~33880-3116~~

900002375739-7

-12/17/97-01111-005

****758.75 ****758.75

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

2. New Principal Office Address, If Applicable

106-11TH STREET, S.E.

Suite, Apt. #, Etc.

WINTER HAVEN

City & State
WINTER HAVEN, FL

Zip
33880-3116

Country
U.S.A.

3. New Mailing Office Address, If Applicable

106-11TH STREET, S.E.

Suite, Apt. #, Etc.

WINTER HAVEN, FL

City & State
WINTER HAVEN, FL

Zip
33880-3116

Country
U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

04/17/96

5. FEI Number

59-3378667

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
D/P	GARRETT, PATRICIA O.	106 11TH STREET, S.E.	WINTER HAVEN FL 33880-3116
D/S	GARRETT, LAWRENCE H.	8432 MISSION BAY BOULEVARD 106-11TH STREET, S.E.	WINTER HAVEN, FL 33880-3116

REINSTATEMENT

97-1080
12/10/97

8. Name and Address of Current Registered Agent

GARRETT, LAWRENCE H.

~~8432 MISSION BAY BOULEVARD~~

~~WINTER HAVEN, FL 33880-3116~~

106-11TH STREET, S.E.

WINTER HAVEN, FL

33880-3116

9. Name and Address of New Registered Agent

Name

SAME AGENT - DIFFERENT ADDRESS
SEE SECTION 8.

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

33880-3116

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

Lawrence H. Garrett

REGISTERED AGENT MUST SIGN

Date 5 Dec. 1997

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 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: Patricia O. Garrett, President (Patricia O. GARRETT) 5 Dec. 97 (941) 293-0672

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #