

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION  
FOR  
REINSTATEMENT**



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

**FILED**  
98 JUN -2 AM 11:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000080038

1. Corporation Name  
**Southport Ventures, Inc.**

Principal Place of Business: **633 Fifth Key Drive  
Fort Lauderdale, FL 33309**  
Mailing Address: **396 S. Witchduck Rd, Ste 200  
Virginia Beach, VA 23462**

**REINSTATEMENT**

*97-98  
AD*

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		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		396 S. Witchduck Rd		September 23, 1996	
City & State		Suite 200		5. FEI Number	
Zip		Virginia Beach, VA		54-1821191	
Country		Zip		Applied For	
		23462		Not Applicable	
		Country		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	
		USA		\$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
Dir/ Pres	Joseph W. Boyd, Jr	396 S. Witchduck Rd Suite 200	Virginia Beach, VA 23462
VP/ Treas	Frank B. Minschke, II	396 S. Witchduck Rd Suite 200	Virginia Beach, VA 23462

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\*\*\*\*900.00 \*\*\*\*900.00

8. Name and Address of Current Registered Agent

**Robert E. Murdoch**  
790 East Broward Blvd  
Suite 400  
Ft Lauderdale, FL 33301

9. Name and Address of New Registered Agent

Name		
Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, Etc.		
City	State	Zip Code
	FL	

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

*Robert E. Murdoch*

REGISTERED AGENT MUST SIGN

Date **5/26/98**

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: BY:

*Joseph W. Boyd, Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Joseph W. Boyd, Jr., President**

May 22, 1998

Date

(757) 490-1959

Daytime Phone #

CR2E040 (1/98)