

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

99 MAR -2 AM 10: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000011802

1. Corporation Name

WINDSOR REFERRAL NETWORK, INC.

Principal Place of Business

Mailing Address

5205-C 26TH STREET
BRADENTON FL 34207

5205-C 26TH STREET
BRADENTON FL 34207



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

2. New Principal Office Address, If Applicable

1815 S OSPREY AVE

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

1815 S. OSPREY AVE

Suite, Apt. #, etc.

City & State

SARASOTA, FL.

Zip 34239

Country SARASOTA

City & State

SARASOTA, FL.

Zip 34239

Country SARASOTA

REINSTATEMENT

4. Date Incorporated or Qualified To Do Business in Florida

02/03/1997

5. FEI Number

65-0733746

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	2	3	4
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
PSTD	ROSARIO, DELIA M	5205-C 26TH STREET WEST	BRADENTON FL 34207
V	SLOUDERS, ANN	5205-C 26TH STREET WEST	BRADENTON FL 34207

600002799886--5
-03/09/99--01089--009
****750.00 ****750.00
600002799886--5
-03/09/99--01089--010
****150.00 ****150.00

8. Name and Address of Current Registered Agent

ROSARIO, DELIA
5205-C 26TH STREET WEST
BRADENTON FL 34207

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

Delia Rosario

REGISTERED AGENT MUST SIGN

Date

1/15/99

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:

Delia Rosario

DELIA M ROSARIO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/99

(941) 366-7673

Date