

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



98 AR  
FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P97000049332**

1. Corporation Name

**Westside Property Investors, Inc.**

Principal Place of Business

Mailing Address

**1608 East Mobile Avenue  
Tampa, FL 33610**

**1608 East Mobile Ave  
Tampa, FL 33610**

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

2. New Principal Office Address, If Applicable

**N/A**

Suite, Apt. #, etc.

**N/A**

City & State

**N/A**

Zip

Country

3. New Mailing Office Address, If Applicable

**N/A**

Suite, Apt. #, etc.

**N/A**

City & State

**N/A**

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

**6/2/97**

5. FEI Number

**59-3452452**

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
Pres.	Reginald C. Garth	1608 E. Mobile Ave	Tampa, FL 33610
VP	Johnny Wilson	609 N. Woodlynn Ave.	Tampa, FL 33609
Sec.	Derrick Worrels	10103 Lake Oak Circle	Tampa, FL 33624

**100002566651--1**  
**06/19/98-01118-012**  
**\*\*\*\*150.00 \*\*\*\*150.00**

8. Name and Address of Current Registered Agent

**Reginald C. Garth  
1608 East Mobile Avenue  
Tampa, FL 33610**

9. Name and Address of New Registered Agent

Name

**N/A**

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

Suite, Apt. #, Etc.

City

State

**FL**

Zip Code

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

**6/19/98**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**REGINALD C. GARTH PRESIDENT**

Date

**6/11/98 (813)**

Daytime Phone #

**272-2604**