

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV -7 AM 10:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000050030

1. Corporation Name

GARY LAYTON PROPERTY MANAGEMENT, INC.

Principal Place of Business

7204 DELAND AVE
FORT PIERCE FL 34951

Mailing Address

POST OFFICE BOX 651182
VERO BEACH FL 32965-1182

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/06/1997

5. FEI Number

65-0759361

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 3	City / State / Zip 4
PTD	LAYTON, DAVID GARY	7204 DELAND AVE	FORT PIERCE FL 34951
VSD	LAYTON, JUNE R	7204 DELAND AVE	FORT PIERCE FL 34951

200008871072
11/07/02--01056--019 **150.00

11/15

8. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent

Name

David Gary Layton

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

7204 Deland Ave.

Suite, Apt. #, Etc.

City

Fort Pierce

State

FL

Zip Code

34951

CH2E040 (8/02)

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. or 617.0505, F.S.

Signature of
Registered Agent

David G. Layton
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 11/4/02

11. 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:

David G. Layton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
David G. Layton

11/4/02
Date

772-464-2240
Daytime Phone #

**GARY LAYTON PROPERTY
MANAGEMENT, INC.
P O BOX 651182
7204 DELAND AVENUE
FORT PIERCE, FL 34951**

November 4, 2002

The current Registered Agent and a Corporate Officer have signed the Application for Reinstatement. Please note that the Registered Agent has changed. The one you have on file is no longer associated with this Corporation. The two prior notices were never received, and we believe this is because the forms were sent to the address of the former Registered Agent.

We are enclosing a check for \$150.00 and requesting that the Reinstatement Fee be waived, as we never received the original forms.

Thank you for your attention to this matter.

**David G. Layton
President**

David G. Layton