

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 18 AM 10:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000050419

1. Corporation Name

GREENFLOWER GOLF & ASSOCIATES, INC.

Principal Place of Business

6650 HUNTINGTON LAKES
#201
NAPLES FL 34119

Mailing Address

6650 HUNTINGTON LAKES
#201
NAPLES FL 34119

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

2. New Principal Office Address, If Applicable

14049 WILLOW GLEN CT.

Suite, Apt. #, etc.

242

City & State

PORT CHARLOTTE FL

Zip

33953

Country

US

3. New Mailing Office Address, If Applicable

14049 WILLOW GLEN CT.

Suite, Apt. #, etc.

242

City & State

PORT CHARLOTTE FL

Zip

33953

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

06/09/1997

5. FEI Number

65-0759335

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status



000009045390
11/18/02--01042--009 **150.00

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PSTD	REED, DOUGLAS J	6650 HUNTINGTON LAKES CIRCLE #20	NAPLES FL 34119

8. Name and Address of Current Registered Agent

REED, DOUGLAS J
6650 HUNTINGTON LAKES CIRCLE
201
NAPLES FL 34119

9. Name and Address of New Registered Agent

Name

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11-5-02

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:

SDOUGLAS REED PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11-5-02 239-404-1335

CR2E040 (8/02)

GREENFLOWER GOLF AND ASSOCIATES, INC.
14049 WILLOW GLEN COURT
PORT CHARLOTTE, FL 33953-5666

November 14, 2002

To Whom It May Concern:

I apologize for not returning the uniform business report sooner but due to my moving this was forwarded to my new address and I just received it. I never received the two prior UBR notices. Please note the change of address. Enclosed find a copy of the change of address on the UBR notice. Thank you for your understanding in this matter.

Sincerely,



Douglas J. Reed
President of Greenflower Golf & Associates, Inc.