PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9700058816

1. Corporation Name

BIG DOG INVESTMENTS, INC.

Principal Place of Business

Mailing Address

12007 PANAMA CITY BEACH PKWY PANAMA CITY BEACH FL 32407

12007 PANAMA CITY BEACH PKWY





03 NOV -7 PM 4: 29

SECRETARY OF STATE (ALLAHASSEE, FLORIDA

•	addresses are incorrect in any way, line		Y BEACH FL 32407 Information and enter	correction below.	REI	STATEME	M <u>2003</u>
2. Ngw Pr	incipal Office Address, If Applicable	3. New Mail	ing Office Address, It		Date Incorporated or Qualified To Do Business in Florida 07/03/1997		
Suite, Apt.	#, etc.	Suite, Apt. #	Suite, Apt. #, etc.		5. FEI Numbe		Applied For
City & Stat	te	City & State	City & State			59-3459937	Not Applicable
Zip	Country	Zip	Count	гу	6. CERTIFICAT	E OF STATUS DESIRED S	3.75 Additional Fee required for a Certificate of Status
7. Names	and Street Addresses of Each Officer a	nd/or Director (Flo	orida nonprofit corpor	ations must list at lea	ast 3 directors)		
Title(s) 1	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zin		
PVTS	rts Fletcher, Jesse		2413 DRAGONS RIDGE RD		PANAMA CITY FL 32411		
	,						
					90	100245256 10301070010	549
				-	11/07/	/0301070010	**750.00
				·			
					·		
8. Name and Address of Current Registered Agent				Name and Address of New Registered Agent			
	•			Name			
FLETCHER, JESSE 3413 DRAGONS RIDGE RD.				Street Address (P.O. Box Number is Not Acceptable)			
PO BOX 27607				Suite, Apt. #, Etc.			
PANAMA CITY FL 32411			City			State Zip Code	
10. I, bein	g appointed the registered agent of the	above named corp	oration, am familiar v	vith and accept the o	bligations of Sec	tion 607.0505, F.S. or 617.05	05, F.S.
Signature of Registered Agent			the	· · · · · · · · · · · · · · · · · · ·		Date	03
		REGISTERED AG	SENT MUST SIGN				1
	y that I am an officer or director or the re enstatement application, the reason for di						

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.

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR