

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JAN -7 PM 3:26

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P98000045887**

1. Corporation Name

SEVILLE HARBOUR REAL ESTATE, P.A.

Principal Place of Business

Mailing Address

434 E. ZARAGOZA STREET
PENSACOLA FL 32501

434 E. ZARAGOZA STREET
PENSACOLA FL 32501

REINSTATEMENT 03



300026175843
01/06/04--01062--031 **150.00

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

05/19/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-1681925

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
D	BIGLER, DIANA R	434 E. ZARAGOZA STREET	PENSACOLA FL 32501

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BIGLER, DIANA R
434 E ZARAGOZA ST
PENSACOLA FL 32501

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

Diana R. Bigler
[Signature]

REGISTERED AGENT MUST SIGN

Date

December 15, 2003
[Signature]

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:

Diana R. Bigler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

December 15, 2003

Daytime Phone #

850-572-4964
850-433-9080

CR2ED40 (7/03)

December 15, 2003

To Whom It May Concern:

The two prior UBR notices were not received. Please reinstate the corporation to an "active" status.

Thank you,

Olana R Biden
Director