

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **098000049487**

1. Corporation Name

The Property Place Inc.

2. Principal Office Address

13180 N. Cleveland Ave

Suite, Apt. #, etc.

107

City & State

N. Fort Myers, FL

Zip

33903

Country

3. Mailing Office Address

13180 N. Cleveland Ave

Suite, Apt. #, etc.

107

City & State

N. Fort Myers, FL

Zip

33903

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/03/1995

5. FEI Number

65-0857247

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

David Tison

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

13180 N. Cleveland Ave

Suite, Apt. #, Etc.

107

City

N. Fort Myers

200005236522-6

04/10/02 01070 024

*****300.00 ***300.00**

State

FL

Zip Code

33903

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

David Tison

REGISTERED AGENT MUST SIGN

Date

2-20-02

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PPS	David Tison	13180 N. Cleveland Ave	N. Fort Myers FL
TD	David Tison	13180 N. Cleveland Ave	N. Fort Myers FL

10. 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 Tison
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-20

Daytime Phone #

941.995.1133

THE PROPERTY PLACE, INC.

13180 N. CLEVELAND AVENUE

NORTH FORT MYERS, FL 33903

941 995 1133 Local
800 996 8825 Toll Free
941 995 2357 Fax

20f2
Email address: tpplace@hotmail.com

Web site: thepropertyplaceinc.com

Friday, March 22, 2002

To whom it may concern,

After a divorce I moved and never recieved my annual corporate filing papers as they were sent to my old home address. I am now therefore as instructed after talking with Some one from the division of Corporations sending my reinstatement form with a check of \$300.00 and a change of mailing address on the form.

Thank you for your help and consideration in this matter.

Sincerely,

Dave Tison

Dave Tison