

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

03 NOV -7 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000075608

1. Corporation Name

BLACKSTONE HOMES, INC.

Principal Place of Business

13451 MCGREGOR BLVD
UNIT 21
FT MYERS FL 33919

Mailing Address

13300-560 S CLEVELAND AVENUE PO. 240
#240
FT MYERS FL 33907



REINSTATEMENT 03

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

08/27/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0864887

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
PVST	MCMILLIN, WES JR	3628 HERITAGE LANE	FT MYERS FL 33908

300024509033
11/07/03--01052--010 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MCMILLIN, JOHN W JR
3628 HERITAGE LANE
FT MYERS FL 33908

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
JOHN W MCMILLIN

Date 11/04/03

REGISTERED AGENT MUST SIGN

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:

SIGNATURE
JOHN W MCMILLIN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/04/03

Date

Daytime Phone #

CR2E040 (7/03)

Blackstone Homes Inc.

13300-56 S. Cleveland Ave. PO:240

Fort Myers Fl 33907

To: Florida Department of State
Division of Corporation

From: John W. McMillin

To Whom It May Concern:

Please note that I have not received any notification regarding filing the business report prior to the note of the application for reinstatement. I was not aware of the report had to be mailed in by May 1. Please reinstate the corporation as soon as possible.

Thank you,


John W. McMillin
