

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1

**CORPORATION
REINSTATEMENT**



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

FILED

00 JAN 27 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000020981**

1. Corporation Name

GREYHOUND COMMERCE PARK, INC.

2. Principal Office Address
3838 Tamiami Trail

3. Mailing Office Address
3838 Tamiami Trail

Suite, Apt. #, etc.
Suite 402

Suite, Apt. #, etc.
Suite 402

City & State
Naples, Florida

City & State
Naples, Florida

Zip Country
34103 USA

Zip Country
34103 USA

4. Date Incorporated or Qualified
To Do Business in Florida 9/17/98

5. FEI Number
59-3545682

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

J. Thomas Conroy, III

800003119068-1

Street Address (P.O. Box Number is Not Acceptable)
3838 Tamiami Trail

-02/01/00-01107-012

***300.00 ***300.00

Suite, Apt. #, Etc.
Suite 402

City
Naples

State Zip Code
FL 34103

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

REGISTERED AGENT MUST SIGN

Date 1/24/00

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
D/P/T	Emil Zmenak	3838 Tamiami Trail, Ste. 402	Naples, Florida 34103
D/V/S	Carole Zmenak	3838 Tamiami Trail, Ste. 402	Naples, Florida 34103
			SP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/99)

2

January 24, 2000

Via Federal Express

Secretary of State
The Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

ATTN: Reinstatement Division

Re: **Greyhound Commerce Park, Inc. / Document #P98000080981**

Dear Sir/Madam:

It has come to our attention that our Corporation was "administratively dissolved" in September 1999 because your offices did not receive an Annual Report for 1998.


We are respectfully requesting a reinstatement as we never received notification of the Annual Report. I note that the address cited on the first page of the Articles of Incorporation is incorrect, i.e., the Suite number **should** be "402". It is apparent that through this error, the Annual Report was not received by us.

We have been advised that this corporation will be reinstated for a fee of Three Hundred Dollars (\$300.00) upon receipt of this letter and the enclosed Application for Reinstatement.

Please provide a Certificate of Status for this corporation at your earliest convenience and advise if it is necessary for us to have an Amendment prepared to correct the address.

Should you have any questions or concerns, please feel free to contact the Registered Agent.

Very truly yours,



Emil Zmenak

Encl.