FILED
99 NOV 30 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

DOCUMENT # P98 0000 84257

1. Corporation Name
HARBOR BOULEVARD, INC.

Principal Place of Business | Mailing Address

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

REINSTATEMENT 99

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
18401 Murdock Circle	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Pt. Charlotte FL	City & State
Zip 33948 Country USA	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: 09/30/1998

5. FEI Number: 65-0872489 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PST D	Ronald B. Oskey	12860 S.W. Pembroke Circle	Lake Suzy, FL 34266

8. Name and Address of Current Registered Agent

Michael R McKinley, Esquire
18401 Murdock Circle
Pt. Charlotte, FL 33948

9. Name and Address of New Registered Agent

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.

Signature of Registered Agent _____ Date 11/29/99
REGISTERED AGENT MUST SIGN

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☑ (See other side for information on intangible tax.)

12. 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. 200003056612--7

KE

SIGNATURE: Ronald B Oskey 11/29/99 (941) 255-0060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Ronald B Oskey, President

2

CSC THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 497272 81445B

AUTHORIZATION :

COST LIMIT : $ 758.75

Patricia Pizzi

ORDER DATE : November 30, 1999

ORDER TIME : 10:15 AM

ORDER NO. : 497272-005

CUSTOMER NO: 81445B

CUSTOMER: Michael R. Mckinley, Esq
Batsel Mckinley Ittersagen
18401 Murdock Circle

Port Charlotte, FL 33948

DOMESTIC FILINGS

NAME: HARBOR BOULEVARD, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS KB

RECEIVED
99 NOV 30 AM 11:33
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA