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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 SEP 16 AM 7:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P99000004463**

1. Corporation Name

**BAYOU COMMUNICATIONS, INC.**

**REINSTATEMENT**

00-02

2. Principal Office Address

**90 BIRCH STREET**

Suite, Apt. #, etc.

City & State

**FREEPORT, FLORIDA**

Zip

**32439**

Country

**USA**

3. Mailing Office Address

**90 BIRCH STREET**

Suite, Apt. #, etc.

City & State

**FREEPORT, FLORIDA**

Zip

**32439**

Country

**USA**

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

**59-2336307**

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

**BERT MOORE**

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

**4677 HIGHWAY 20E**

Suite, Apt. #, Etc.

City

**NICEVILLE**

State  
**FL**

Zip Code

**32578**

700007854057-5  
09/19/02-01082-013  
\*\*\*1050.00 \*\*\*1050.00

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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date

**8/1/02**

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

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|--------------------|
| Pres   | NORTON GILSON                        | 90 BIRCH STREET                                   | FREEPORT, FLORIDA  |
| V/P    |                                      |   |                    |
| S/T    | LAURA GILSON                         | 90 BIRCH STREET                                   | FREEPORT, FLORIDA  |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |
|        |                                      |   |                    |

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:

*Laura Gilson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8/1/02**

Date

Daytime Phone #

CR2E081 (9/01)

2 of 2

BERT MOORE, P.A.  
ATTORNEY AT LAW  
4677 E. HIGHWAY 20, SUITE 1  
POST OFFICE BOX 950  
NICEVILLE, FLORIDA 32588-0950  
  
(850) 678-6883  
FAX (850) 678-4210  
moore@bertmoorepa.gccoxmail.com

August 2, 2002

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Dear Sirs:

Enclosed please find a Corporation Reinstatement application for BAYOU COMMUNICATIONS, INC. along with check # 5078 in the amount of \$1050.00. Please process this Corporation Reinstatement and return to:

Bert Moore, P.A.  
Post Office Box 950  
Niceville, Florida 32588-0950

Should you have any further questions, please contact me at (850) 678-6883.

Sincerely,

  
Kirk Lancaster  
Paralegal

Enclosures (as stated)