

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

FILED

02 MAY 23 PM 2:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

100005677951--4  
-06/04/02--01074--008  
\*\*\*\*300.00 \*\*\*\*300.00

01-02

DOCUMENT # **P99000023987**

**1. Corporation Name**

*South Walton Land Company*

**2. Principal Office Address**

*202 North Duval St.*

Suite, Apt. #, etc.

**City & State**

*Madison, FL*

**Zip**

*32340*

**Country**

*Madison*

**3. Mailing Office Address**

*P.O. Box 637*

Suite, Apt. #, etc.

**City & State**

*Madison FL*

**Zip**

*32341*

**Country**

*Madison*

**4. Date Incorporated or Qualified  
To Do Business in Florida**

*3/10/99*

**5. FEI Number**

*59-3677243*

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**

*Steve Guinn*

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

*202 North Duval St.*

Suite, Apt. #, Etc.

**City**

*Madison*

**State**

*FL*

**Zip Code**

*32340*

**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

*S. Guinn*

Date *5/23/02*

REGISTERED AGENT MUST SIGN

**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
Dir	<i>K. S. Guinn Jr.</i>	<i>202 North Duval St.</i>	<i>Madison FL 32340</i>
Dir	<i>M. S. Guinn</i>	<i>202 North Duval St.</i>	<i>Madison FL 32340</i>

**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:**

*S. Guinn Steve Guinn (Pm)*

*5/23/02 (850)974-8581*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/01)

5/23/02

2052

To whom it may concern:

Please be advised, I was not aware, South Western Land Company, was not current.

[REDACTED]

Also I should note, the renewal did not follow when the move was made.

I picked it up on the computer yesterday.

Thanks and best regards

S. J. Curran