

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # P99000082389

1. Corporation Name
CATHEDRAL PLACE GALLERY, INC.

Principal Place of Business
24 CATHEDRAL PL., STE. 101
ST. AUGUSTINE FL 32084

Mailing Address
24 CATHEDRAL PL., STE. 101
ST. AUGUSTINE FL 32084



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

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip Country

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip Country

4. Date Incorporated or Qualified To Do Business in Florida
09/13/1999

5. FEI Number
59-3597794

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	DAWSON, ROSEMARY	24 CATHEDRAL PL., STE. 101	ST. AUGUSTINE FL 32084
D	DAWSON, GARY	24 CATHEDRAL PL., STE. 101	ST. AUGUSTINE FL 32084

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****150.00 ****150.00

10/27

8. Name and Address of Current Registered Agent
DUNCAN, DONALD W P.A.
25 FLORIDA PARK DR. N.
PALM COAST FL 32137

9. Name and Address of New Registered Agent
Name
KENNETH R. KRESGE CPA, PA
Street Address (P.O. Box Number is Not Acceptable)
403 ANASTASIA BLVD
Suite, Apt. #, Etc.
SUITE 1
City
ST. AUGUSTINE
State
FL
Zip Code
32080

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
K. KRESGE
REGISTERED AGENT MUST SIGN

Date
10/25/00

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
KENNETH R. KRESGE

Date
10/24/2000

Daytime Phone #
9048270027

CR2E040 (800)

Cathedral Place Gallery Inc.
24 Cathedral Place Gallery
H. August Lane, Florida 32084

Florida Dept. of State
Divisions of Corporations
P.O. Box 6327 Tallahassee Fla 32314

Subject: Cathedral Place Gallery Inc.
Sequence # P990000829389

Dear Mr. Yoner,

As you requested I am notifying you today as to the date in which our 2nd notification was received to file our corporate annual/uniform business report. We received this form on or about the third week in October 2000. I hope this clears up any questions with regards to our file and that we will indeed be re-instated as a corporation. Thank you for your time and effort in this matter.

Sincerely,

Joan Mary Dawson
(Consider Paid money)