

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1072

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
05 APR 14 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P 99000111618

1. Corporation Name

SOUTHERN POSSESSIONS, INC.

2. Principal Office Address

1343 MAIN STREET

3. Mailing Office Address

1343 MAIN STREET

Suite, Apt. #, etc.

SUITE 302

Suite, Apt. #, etc.

SUITE 302

City & State

SARASOTA, FL

City & State

SARASOTA, FL

Zip

34236

Country

USA

Zip

34236

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

12/29/1999

5. FEI Number

593615697

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

REINSTATEMENT 03/05

**7. Name and Address of Current Registered Agent**

Name

DENNIS L. HOLLY

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

453 MEADOWLARK DRIVE

Suite, Apt. #, Etc.

City

SARASOTA

State

FL

Zip Code

34236

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

Dennis L. Holly

REGISTERED AGENT MUST SIGN

Date 4-8-05

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
P	DENNIS L. HOLLY	453 MEADOWLARK DR.	SARASOTA, FL. 34236
ST	JANICE L. HOLLY	453 MEADOWLARK DR.	SARASOTA, FL 34236

700054124277  
05/10/05--01008--007 \*\*450.00

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:

Dennis L. Holly DENNIS L. HOLLY

4-8-05

941-400-0900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/05)

252

Southern Possessions, Inc.  
1343 Main Street  
Suite 302  
Sarasota, Florida 34236

Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Regarding: SOUTHERN POSSESSIONS, INC.

Document #: P99000111618

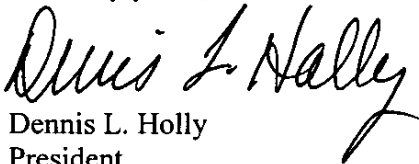
Concerning: Corporation Reinstatement

To Whom It May Concern:

For some reason we did not receive a notice to file an Annual Report in 2003 and as a result we did not receive notices from that point to now. We intended on filing Annual Reports for Southern Possessions, Inc. and have enclosed a Corporation Reinstatement form for your review.

Considering we missed getting the required form we hope you will consider waving any penalties and accept our reinstatement fee of \$450.00 which is enclosed with our application. If you have any questions or comments please feel free to contact me on my cell phone at 941-400-0900. Thank you for your consideration in this matter.

Sincerely yours,



Dennis L. Holly  
President  
Southern Possessions, Inc.