

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION REINSTATEMENT**



**FLORIDA DEPARTMENT OF STATE**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT #** F02000001614

1. Corporation Name  
**PALMETTO MARKETING OF MYRTLE BEACH, INC.**

2. Principal Office Address - No P.O. Box # <b>1051 Shine Avenue</b> <small>State, Apt. #, etc.</small>		3. Mailing Office Address <b>1051 Shine Avenue</b> <small>State, Apt. #, etc.</small>	
<small>City &amp; State</small> <b>Myrtle Beach, SC</b> <small>Zip</small> <b>29577</b> <small>Country</small> <b>USA</b>		<small>City &amp; State</small> <b>Myrtle Beach, SC</b> <small>Zip</small> <b>29577</b> <small>Country</small> <b>USA</b>	

CR2E001 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida  
**03/29/2002**

5. VET Number  
**57-0924092**

Applied For  
 NOT Applicable

6. CERTIFICATE OF STATUS DESIRED  \$3.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name  
**CT Corporation System**

Street Address (P.O. Box Number is NOT Acceptable)  
**1200 South Pine Island Rd**

State, Apt. #, Etc.  
**Plantation**

City  
**Plantation**


STATE **FL** ZIP CODE **33324**

**REINSTATEMENT**

**JAN 15 2014**

**R. HUNT**

B. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0303 or 817.0303, F.S.

Signature of Registered Agent  **Jordan Brown, Assistant Secretary**  
CT Corporation System

Date **01/13/2014**


REGISTERED AGENT MUST SIGN

B. 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
Chairman & CEO	<b>William R. Young</b>	<b>1051 Shine Ave.</b>	<b>Myrtle Beach, SC 29577</b>
President	<b>Paul Foxdrich</b>	<b>1051 Shine Ave.</b>	<b>Myrtle Beach, SC 29577</b>
Senior Vice Pres.	<b>Kenneth W. Collins</b>	<b>1051 Shine Ave.</b>	<b>Myrtle Beach, SC 29577</b>

10. E-mail Address: **jsessions@spmrresorts.com**  
(To be used for future annual report notification)

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 807 or 817, 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 807.0401 or 817.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a 817.155, F.S.

**SIGNATURE:**  **William R. Young**  
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **1-14-14** 843-238-5000  
Date

Division of Corporations

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Florida Department of State  
Division of Corporations  
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From: Account Name : C T CORPORATION SYSTEM  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**CORPORATION REINSTATEMENT  
PALMETTO MARKETING OF MYRTLE BEACH, INC.**

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JAN 15 2014

R. HUNT

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