PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 MAR 12 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 714537

1. Corporation Name
Florida Land Surveyors Scholarship Foundation, Inc.

W98-4926

Principal Place of Business / Mailing Address
1689-A Mahan Center Blvd.
Tallahassee, FL 32308

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

REINSTATEMENT 95-98

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

4. Date Incorporated or Qualified To Do Business in Florida: 3-30-68

5. FEI Number: 59-0209240 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED [X] — $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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres	Dennis E. Blankenship D	316 S. Baylen, Suite 300	Pensacola, FL 32501
Vice Pres	Charles J. Dunbar D	7400 Tamiami Trail, North	Naples, FL 33963
Sec	John N. Breed D	2525 Drane Field Rd, Ste 7	Lakeland, FL 33811
Treas	Louis R. Campanile, Jr. D	546 Spinnaker	Weston, FL 33326-2942
Immed Past	Gordon R. Niles D	2155 Art Museum Dr.	Jacksonville, FL 32207
Pres Elect	W. Lanier Mathews, II D	P. O. Box 188 N/A	Palmetto, FL 34220

8. Name and Address of Current Registered Agent

Marilyn C. Evers
1689-A Mahan Center Blvd.
Tallahassee, FL 32308

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City / State / Zip Code

3/13

CR2E040 (10/96)

200024 FL 542---4
09/17/98--01025--005
****428.75

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: Marilyn C Evers
REGISTERED AGENT MUST SIGN

Date: 3/26/98

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No [X]

(See other side for information on intangible tax.)

12. 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 E. Blankenship — 3-26-98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #