

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

APPROVED AND FILED

98 SEP 30 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 734425
1. Corporation Name
LAND O' LAKES BOARD OF REALTORS, INC.

Principal Place of Business Mailing Address
PO BOX 127 LAND O' LAKES, FL 34639
PO BOX 127 LAND O' LAKES, FL 34639

REINSTATEMENT 97-98

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
11/25/1975

5. FEI Number
59-1850585
Applied For Not Applicable

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 (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	Chastain, Jeani	17551 Willow Pond Dr.	Lutz, FL 33549
VP	Eckley, Rebecca S.	14013 Lake Magdalene Blvd	Tampa, FL 33618
T	Hernandez, Karen	4518 Grainary Ave	Tampa, FL 33624
S	Stepanek, Sandra R.	3049 Lake Saxon Dr	Land o' Lakes, FL 34639
D	Easton, Josephine B.	409 Hayes Rd	Lutz, FL 33549
D	Barr, Larry A.	23219 Dover Dr.	Land o' Lakes, FL 34639

8. Name and Address of Current Registered Agent
Chastain, Jeani
17751 Willow Pond Dr.
Lutz, FL 33549

9. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc. 700002658657-1
City -10/08/98-01013-001
***297.50

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: Jeani Chastain
REGISTERED AGENT MUST SIGN
Date: 9-3-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (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: Jeani Chastain
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: 9-3-98
Daytime Phone #: (813) 949-7444

CPRE040 (1-98)