

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 DEC 17 AM 8:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N42165

1. Corporation Name

LAKE JOANNA IMPROVEMENT LEAGUE, INC.

Principal Place of Business

Mailing Address

33355 COUNTY RD 44-B
EUSTIS FL 32736
US

33547 COUNTY RD 44-B
EUSTIS FL 32736
US

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

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

02/19/1991

5. FEI Number

59-3140059

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)

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
S	DEAN, DEVERN	33547 C.R. 44-B	EUSTIS FL
P P	LUSHEAR, LEWIS PAT ROGERS	33639 WESLEY RD 33629 WESLEY RD	EUSTIS FL EUSTIS FL
T	BRADNER, MICHAEL	33616 WESLEY RD.	EUSTIS FL
D	VANLANDINGHAM, DEAN	33469 E. LAKE JOANNA DRIVE	EUSTIS FL 500002718565-5 12/22/98-01033-019 ***236.25 ***236.25
D	WILSON, DANIEL	33405 WESLEY RD	EUSTIS FL
D	BARR, GENE	33508 WESLEY RD	EUSTIS FL

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LUSHEAR, LEWIS
33639 WESLEY RD
EUSTIS FL 32736

Name **Pat Rogers**
Street Address (P.O. Box Number is Not Acceptable)
Wesley Rd
Suite, Apt. #, Etc.
City **Eustis** State **FL** Zip Code **32736**

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

Pat Rogers
REQUIRED
REGISTERED AGENT MUST SIGN

Date **11/23/98**

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:

Devern Dean
REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/14/98
Date

352-735-1099
Daytime Phone #

CR2ED04 (8/98)