

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

97 DEC 19 PM 3:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 250338

1. Corporation Name

LAWYERS PROFESSIONAL BUILDING INC

Principal Place of Business

Mailing Address

3012 DESOTO RD.
SARASOTA FL 34234

~~3012 DESOTO RD.~~
~~SARASOTA FL 34234~~

100002380571--5
-12/23/97--01063--010

If above addresses are incorrect in any way, and you wish to correct them, enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

08/17/1961

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59-0992773

Not Applicable

Zip

Country

Zip

Country

34236

USA

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
PD	PETERS, EVELYN E.	3012 DESOTO RD	SARASOTA FL
PD	PETERS, BYRON W.	2639 JEFFERSON CIRCLE	SARASOTA FL
PD	PETERS, PHILIP STEVEN	41 WALLACE ST.	SARASOTA FL
VP	Derr, Wayne L.	c/o Nationsbank, N.A. 1605 Main St.	Sarasota, FL 34236
S,T	Harrison, William T., Jr.	200 S. Orange Ave.	Sarasota, FL 34236
Asst. Sec.	Grebe, Jeffrey A.	200 S. Orange Ave.	Sarasota, FL 34236

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~PETERS, EVELYN E.~~
~~3012 DESOTO RD~~
~~SARASOTA FL 34234~~

Name
William T. Harrison, Jr.
Street Address (P.O. Box Number is Not Acceptable)
200 S. Orange Ave.
Suite, Apt. #, Etc.
City
Sarasota
State
FL
Zip Code
34236

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

William T. Harrison, Jr.

Date

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12-16-97

CR2E040 (8/97)