

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



**FLORIDA DEPARTMENT OF STATE**

**Jim Smith**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

04 AUG 23 AM 9:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # 705215**

**1. Corporation Name**

The Greater Clearwater Association of Realtors, Inc.

**2. Principal Office Address**

1545 S. Belcher Road

**3. Mailing Office Address**

P.O. Box 6177

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Clearwater, FL

City & State

Clearwater, FL

Zip

33764

Country

USA

Zip

33758

Country

USA

**4. Date Incorporated or Qualified  
To Do Business in Florida**

02/18/1963

**5. FEI Number**

591006368

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☒**

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

David Bennett

Street Address (P.O. Box Number is Not Acceptable)

7655 38th Avenue North

Suite, Apt. #, Etc.

City

St. Petersburg

State

FL

Zip Code

33710-1275

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of

Registered Agent

Date

8/16/2004

REGISTERED AGENT MUST SIGN

**9. 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
P/D	Laurie Neiman	1545 S. Belcher Road	Clearwater, FL 33764
T/D	David Bennett	7655 38th Avenue North	St. Petersburg, FL 33710-1275
VP/D	Michael A. J. Bindman	13700 Park Boulevard	Seminole, FL 33776-3401

**10. 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:**

David Bennett

8/16/2004

727-347-7655

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED81 (9/01)