

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 AUG 20 PM 3:10

DOCUMENT # 721346

1. Corporation Name

Beta Eta Zeta of Lambda Chi Alpha, Inc.

800004554818--9
-08/24/01--01038--002
****358.75 ****358.75

2. Principal Office Address

2013 Conway Gardens

Suite, Apt. #, etc.

City & State

Orlando, FL

Zip

32806

Country

U.S.

3. Mailing Office Address

2013 Conway Gardens Rd.

Suite, Apt. #, etc.

City & State

Orlando, FL

Zip

32806

Country

U.S.

REINSTATEMENT 99-0

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

5. FEI Number

310969086

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

George R. Steinbarger, Jr.

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

14702 Parnborough Ct.

Suite, Apt. #, Etc.

City

Orlando

State
FL

Zip Code

32826

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

George R. Steinbarger, Jr.

REGISTERED AGENT MUST SIGN

Date 8/13/01

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-	Gordon Miranda	7436 Antietam St.	Winter Park, FL
D	Michael Saunders	2013 Conway Gardens Rd.	Orlando, FL 32806
D	Brian Battles	3041 Southern Pine Trail	Orlando, FL 32826
D	George Steinbarger	14702 Parnborough Ct.	Orlando, FL 32826
	297.50-Adm		
	61.25-AR		

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:

George R. Steinbarger, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/13/01
Date

(407) 359-0584
Daytime Phone #

CR2E081 (9/00)