

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>APPLICATION FOR REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS		FILED 98 AUG -3 AM 8:45 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<b>DOCUMENT #</b> <span style="font-size: 2em; font-weight: bold;">F14381</span> 1. Corporation Name Appraisal Services Rex A. Rusaw, Inc.					
Principal Place of Business 2354 S. Bascombe Ave. Homosassa, Fl. 34448		Mailing Address P.O. Box 66 Lecanto, Fl. 34460			
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 Address, If Applicable  Suite, Apt. #, etc.  City & State  Zip                      Country		DO NOT WRITE IN THIS SPACE  4. Date Incorporated or Qualified To Do Business in Florida  5. FEI Number <div style="border: 1px solid black; padding: 2px; display: inline-block;">59-2919010</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px;">Applied For Not Applicable</div>	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$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		
1	2	3	4		
P	Rex A. Rusaw	2354 S. Bascombe Ave.	Homosassa, Fl. 34448		
S/T	Teresa A. Rusaw	2354 S. Bascombe Ave.	Homosassa, Fl. 34448		
<div style="font-size: 2em; font-weight: bold; transform: rotate(-5deg);">W98000016370</div>					
200002608562-3 -08/05/98-01/03/99 ***1050.00 ***1050.00					
<div style="font-size: 3em; font-weight: bold; transform: rotate(-5deg);">REINSTATEMENT</div> <div style="font-size: 2em; font-weight: bold; transform: rotate(-5deg);">96-98</div> <div style="font-size: 2em; font-weight: bold; transform: rotate(-5deg);">8-5-98</div>					
8. Name and Address of Current Registered Agent  Teresa A. Rusaw, Owner <del>P.O. Box 66</del> 2354 S. Bascombe Ave. <del>Lecanto, Fl. 34460</del> Homosassa, Fl. 34448			9. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.  City                      State                      Zip Code FL		
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. <div style="display: flex; justify-content: space-between;"> <div>           Signature of Registered Agent              REGISTERED AGENT MUST SIGN         </div> <div>           Date            3/31/98            4/31/99         </div> </div>					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes.    Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> <div style="text-align: right; font-size: 0.8em;">(See other side for information on intangible tax.)</div>					

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:** Teresa A. Rusaw S/T

3/31/98  
 4/31/99  
 352 628 4322