

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **H52841**

1. Corporation Name

**INTERSTATE FINANCIAL CORPORATION**

Principal Place of Business

222 CARPENTERS WAY  
LAKELAND FL 33809

Mailing Address

323 HEATHERPOINT DRIVE  
LAKELAND FL 33809

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

04/17/1985

5. FEI Number

59-2527747

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PSD	STRADER, DANIEL D	323 HEATHERPOINT DR.	LAKELAND FL 33809

800024567498  
11/10/03--01081--009 \*\*150.00

8. Name and Address of Current Registered Agent

STRADER, DANIEL D  
323 HEATHERPOINT DR.  
LAKELAND FL 33809

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State  
**FL**

Zip Code

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. or 617.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

October 31, 2003

11. 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

Daniel D. Strader

Date

10/31/03

Daytime Phone #

863-853-3816

CR2040 (7/03)

--October 31, 2003

PROVIDED TO AVON PARK  
CORRECTIONAL INSTITUTION  
ON 10.27.2003  
FOR MAILING.

Glenda E. Hood  
Secretary of State  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, Fla. 32399

Re: Interstate Financial Corporation  
Document Number: H5284

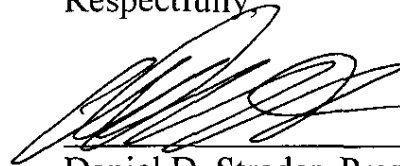
Dear Ms. Hood :

Our corporation did not receive the two prior uniform business report (UBR) notices. Please find enclosed completed application for reinstatement and the appropriate UBR filing fee. As I understand it, the reinstatement fee is waived due to the fact that the corporation never received the two prior UBR notices.

Under penalties of perjury, I Daniel D. Strader declare that the foregoing facts stated in this letter are true.

Thank you for your consideration.

Respectfully



Daniel D. Strader, President  
Interstate Financial Corporation  
323 Heatherpoint Dr.  
Lakeland, Fla. 33809