

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 13 AM 11:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K47851

1. Corporation Name

LOCKETT REALTY, INC.

2. Principal Office Address

3. Mailing Office Address

REINSTATEMENT 91-03

Suite, Apt. #, etc.

Suite, Apt. #, etc.

595 N.W. 50th Avenue

595 N.W. 50th Avenue

City & State

City & State

Delray Beach, FL

Delray Beach, FL

Zip

Country

Zip

Country

33445

USA

33445

USA

4. Date Incorporated or Qualified
To Do Business in Florida 1988

5. FEI Number
65-0083688

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$375 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Woodrow W. Lockett

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

595 N.W. 50th Avenue

Suite, Apt. #, Etc.

Delray Beach, FL 33445

City

State

Zip Code

FL

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

Woodrow W. Lockett

Date 10/24/03

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	Woodrow W. Lockett	595 N.W. 50th Avenue	Delray Beach, FL 33445

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.

Woodrow W. Lockett / Owner-President

SIGNATURE:

Woodrow W. Lockett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/24/03 561-276-6715

Date

Daytime Phone #

CR2E081 (10/02)



135 SE 5th Avenue
Suite 1-North
Delray Beach, FL 33483

Office: 561-276-6715
After Hours: 561-499-9537
Fax: 561-276-6798

TO: Division of Corporations

FROM: Lockett Realty, Inc.

DATE: Oct. 24, 2003

RE: Wavier Letter of Re-instatement

Please accept this Letter of Re-instatement and my check of \$1,987.50.
I did not receive a renewal form in 1991.

Thank you!