

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # <u>N93000000692</u>	CITRUS COUNTY COMMUNITY FOUNDATION, INC.
1. Corporation Name	

FILED

98 MAY 15 AM 9:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(W98-8728)

Principal Place of Business

Mailing Address

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 450 Pleasant Grove Road Suite, Apt. #, etc.	3. New Mailing Office Address, If Applicable 450 Pleasant Grove Road Suite, Apt. #, etc.	4. Date Incorporated or Qualified To Do Business in Florida February 17, 1993
City & State Inverness, FL	City & State Inverness, FL	5. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip 34452	Country Citrus	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status

REINSTATEMENT 94-98

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	Robert E. McCranie, III	450 Pleasant Grove Road	Inverness, FL 34452
D	L. Donald Sutton	450 Pleasant Grove Road	Inverness, FL 34452
D	Chester V. Cole	1315 N. VanNortwick Road	Lecanto, FL 34461

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8. Name and Address of Current Registered Agent

Ron A. Rhoades
440 Commercial Way, Suite 3
Colonial Park,
Spring Hill, FL 34606

9. Name and Address of New Registered Agent

Name
Jeannette M. Haag
Street Address (P.O. Box Number is Not Acceptable)
452 Pleasant Grove Road
Suite, Apt. #, Etc.
City
Inverness State **FL** Zip Code **34452**

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.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date **3/20/98**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information on intangible tax.)

12. 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

March 30, 1998

Date

(352)726-8130

Daytime Phone #

CR2E040 (1/98)