

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 OCT 24 AM 9:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N96000000581

1. Corporation Name

Panhandle Land Conservancy, Inc.

2. Principal Office Address

4399 Commons Drive East

3. Mailing Office Address

same

Suite, Apt. #, etc.

Ste. 300

Suite, Apt. #, etc.

City & State

Destin, FL

City & State

Zip

32541

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

1-24-1996

5. FEIN Number

593360986

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

Steven K. Hall

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

4399 Commons Drive East

Suite, Apt. #, Etc.

Suite 300

City

Destin

State

FL

Zip Code

32541

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

REGISTERED AGENT MUST SIGN

Date 9-28-06

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
D	Steven K. Hall	110 Sunset Cove	Niceville, FL 32578
D	Mike Dentzau	1882 Log Ride Trail	Tallahassee, FL 32313
D	Sherry G. Hall	110 Sunset Cove	Niceville, FL 32578

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 contained in Chapter 119, 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:

Steven K. Hall, Director

9-28-06

850-337-4620

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #