

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONSFILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 SEP 22 AM 9:28

DOCUMENT # N96000002332

1. Corporation Name

Florida State Rural Development Foundation, Inc.

2. Principal Office Address

155 Research Road

3. Mailing Office Address

155 Research Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Quincy, Florida

City & State

Quincy, Florida

Zip

32351

Country

United States

Zip

32351

Country

United States

4. Date Incorporated or Qualified
To Do Business in Florida

5/01/1996

5. FEI Number

20-0103510

☒ Applied For☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$2.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Catherine Hanks

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

155 Research Road

Suite, Apt. #, Etc.

City

Quincy

State
FLZip Code
32351

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.011, F.S.

Signature of
Registered Agent*Catherine C Hanks*

REGISTERED AGENT MUST SIGN

Date *July 22, 2003*

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
c/d	Nancy Wheeler	1207 Sandhurst Drive	Tallahassee, Florida 32312
m/d	Dean Papapetrou	200 South Ohio Dr	Live Oak, Florida 32364
d/r	Catherine Hanks	155 Research Road	Quincy, Florida 32351

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)(b), 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:

Catherine C Hanks

Catherine C Hanks 7/22/03 352/8757196

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ad 9/22

CNPPJT4 - 04 RUN DATE 08/11/2003 AS OF 08/11/2003
FLAIR - CENTRAL ACCOUNTING

450000 00
PAGE 12 213

POSTED JOURNAL TRANSACTIONS BY SWDN WITHIN BENEFITTING OLO AND SITE

AUDIT LOCATION - STATEWIDE
OLO 450000 - DEPARTMENT OF STATE
SITE 00 - DEPARTMENT OF STATE

OLO 491000 - UNIVERSITY OF FLORIDA
SITE 00 - EXT. 323 UNIVERSITY OF FLORIDA
(352)392-1241

SWDN 54000015100 ADOCNO V007327

ACCOUNT CODE	CF	TC	OBJECT	AMOUNT	----- BENEFITTING DATA -----			
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49 20 2 153102 48900700 10 101312 00	25		4990	428.75	45 10 1 000132 45300100 00 000100 00		45	
					INVOICE # 770009UI			428.75
TRANSACTION CODE TOTAL - 25		428.75	45	428.75				

TR 96
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ENTERED SEP 08 2003



July 22, 2003

Mr. Andy Dunlap
Florida Department of State
Division of Corporations
409 East Gaines Street – Firestone Building
Tallahassee, Florida 32399

Dear Mr. Dunlap

The purpose of this correspondence is to request the waiver of reinstatement fee in the amount of \$175.00.

The Florida State Rural Development Foundation, Inc. did not receive the U.B.F. form necessary for annual renewal and reporting beginning in 1997.

Please contact me if you have any questions or concerns regarding this matter – office 850/875-7196 or by email cchanks@mail.ifas.ufl.edu.

Regards,


Catherine Hanks
Florida State Rural Development Foundation, Inc.