

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 28 AM 8:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000022141

1. Corporation Name

FOR RENT BY OWNER, INC.

Principal Place of Business

35008 EMERALD COAST PKWY., STE. 302  
DESTIN FL 32541

Mailing Address

35008 EMERALD COAST PKWY., STE. 302  
DESTIN FL 32541

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

03/03/2000

5. FEI Number

59-3630198

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
PRES	BLANTON, DARRELL E PRES	35008 EMERALD COAST PKWY., STE.	DESTIN FL 32541

500008638325  
10/28/02--01133--011 \*\*150.00

8. Name and Address of Current Registered Agent

BLANTON, DARRELL  
35008 EMERALD COAST PKWY - STE 302  
DESTIN FL 32541

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

10/23/02

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

850-654-  
10/23/02 9889

CR2E040 (8/02)

**FOR RENT by OWNER, INC.**  
**35008 Emerald Coast Parkway**  
**Suite #302**  
**Destin, FL 32541**  
**850-654-9889**

Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

October 23, 2002

To whom it may concern,

I am writing this letter in response to reinstatement form I received today, on behalf of FOR RENT BY OWNER, INC. I have not received any prior communications regarding the 2002 Uniform Business Report. I apologize for our tardiness and will investigate, to the best of my ability, where this breakdown occurred.

Please accept this letter and payment for our 2002 UBR reinstatement.

Sincerely,



Darrell E. Blanton  
President