

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 DEC 11 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000104614

1. Corporation Name

WARR REALTY FLORIDA, INC.

Principal Place of Business

1513 W. CASS ST.
TAMPA FL

Mailing Address

1513 W. CASS ST.
TAMPA FL

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

2. New Principal Office Address, If Applicable

1225 Ashbourne Cir

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Trinity, FL

City & State

Zip

34655

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/06/2000

5. FEI Number

59-3688727

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
D	WARR, LLOYD	8149 BRUMBY CRT	NEW PORT RICHEY FL 34655

700009473287
12/11/02--01065--011 **150.00

8. Name and Address of Current Registered Agent

FISHMAN, STEVEN M
3135 SR 580
SAFETY HARBOR FL 34695

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

CR2E040 (8/02)

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

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 #

11/21/02 727-375 9215

Department of State
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

November 21, 2002

Attention: Department of State:
Subject: Warr Realty Florida Inc.

This letter is to inform you that because of an address change for the corporation we did not receive any other correspondence regarding the status of Warr Realty.

Please find enclosed the completed application for reinstatement and our check for \$150. Above corporation has been active.

Sincerely,

A handwritten signature in black ink, appearing to read 'Lloyd Warr', with a long horizontal flourish extending to the right.

Lloyd Warr
CEO

Warr Realty Florida, Inc.
1225 Ashbourne Circle
Trinity, FL 34655-7107

ljm