

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 DEC 18 PM 2:22

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *P01000046015*

1. Corporation Name

Chain O' Lakes Realty

100009575961
12/18/02--01037--005 **158.75

2. Principal Office Address

743 8th Street

Suite, Apt. #, etc.

City & State

Clermont FL

Zip

34711

Country

USA

3. Mailing Office Address

743 8th street

Suite, Apt. #, etc.

City & State

Clermont FL

Zip

34711

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

May 5 2001

5. FEI Number

59-3716702

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

John Serra

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

743 8th Street

Suite, Apt. #, Etc.

City

Clermont

State

FL

Zip Code

34711

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

[Signature]

REGISTERED AGENT MUST SIGN

Date *16-Dec-02*

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
<i>D</i>	<i>Serra, John D</i>	<i>743 8th St</i>	<i>Clermont FL 34711</i>
<i>D</i>	<i>Angels, Antonette</i>	<i>743 8th St</i>	<i>Clermont FL 34711</i>

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)(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] John Serra
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

16-Dec-2002

Daytime Phone #

(352)

394-3999

CR2ED01 (9/01)



743 8th Street ~ Clermont, FL 34711
(352) 394-3999 ~ www.chainolakesrealty.com

16-Dec-2002

To whom it may concern

Please accept my apologies for this late renewal; I never received my UBR Form

This past year, we discontinued a PO Box and apparently it got forwarded to that box by mistake

I have corrected this problem with the USPS, It should not arise again

As per our telephone conversation on 16-Dec-02 I have included this letter with my \$150.00 fee

Thank you for your understanding in this matter

John Sarra