

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 DEC -2 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000116344

1. Corporation Name

FNB Florida Real Estate Investment Trust Company

2150 Goodlette Road N.

2150 Goodlette Road N.

2. Principal Office Address

2150 Goodlette Road N.

3. Mailing Office Address

2150 Goodlette Road N.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Naples, Florida

City & State

Naples, Florida

Zip

34102

Country

USA

Zip

34102

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 12/7/01

5. FEI Number

65-1153835

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 2004

900043130539

12/02/04--01047--007 **750.00

7. Name and Address of Current Registered Agent

Name

Robert T. Reichert

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

2150 Goodlette Road N.

Suite, Apt. #, Etc.

City

Naples

State

FL

Zip Code

34102

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

Date

REGISTERED AGENT MUST SIGN

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
P/D	Kevin C. Hale	2150 Goodlette Road N.	Naples, Florida 34102
V/D	James L. Goehler	2150 Goodlette Road N.	Naples, Florida 34102
S/D	Robert T. Reichert	2150 Goodlette Road N.	Naples, Florida 34102

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:

Robert T. Reichert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-1-04

Date

239-435-7634

Daytime Phone #

CR2E081 (01/04)