

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JAN 28 PM 1:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 062 000130739

1. Corporation Name

Lakeside Station Realty, Inc.

2. Principal Office Address

507 W. Dr. Martin Luther King

Suite, Apt. #, etc.

City & State

Plant City, Florida

Zip

33563

Country

USA

3. Mailing Office Address

P.O. Drawer X

Suite, Apt. #, etc.

City & State

Plant City, Florida

Zip

33563

Country

USA

REINSTATEMENT 03-04

**4. Date Incorporated or Qualified
To Do Business in Florida**

12/12/02

5. FEI Number

None



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

Bruce J. Sperry

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

1003 S Alexander Street, Ste 1

Suite, Apt. #, Etc.

City

Plant City

State
FL

Zip Code
33563

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

REGISTERED AGENT MUST SIGN

Date

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
D	Louis W. McGrath	507 W. MLK Blvd	Plant City, Florida 33563
D	Louis R. McGrath	507 W MLK Blvd	Plant City, Florida 33563

400027709034
01/28/04--01017--015 **300.00

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Louis W. McGrath
Gail Calhoun McGrath
P.O. Box 3566
Plant City, Florida 33563

January 22 2004

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

RE: Lakeside Station Realty, Inc

Dear Sir;

Enclosed is my check in the amount of \$300.00, representing payment of the 2003 and 2004 Corporate fees, along with my application for Corporate Reinstatement..

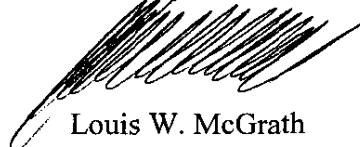
I have been notified that this corporation was dissolved on 9/19/2003.

I request your consideration in a waiver of fees and penalties due on this application, as the mailing address used is a physical address of another office and being in a small town, the post office did not recognize the corporate name and did not deliver my notice. Also, my name is misspelled, which I believe added to this problem.

I have enclosed my renewal application with my Post Office Box address, which should eliminate this problem in the future.

Your consideration in this matter is greatly appreciated.

Sincerely,

A handwritten signature in dark ink, appearing to read "Louis W. McGrath", with a large, sweeping flourish at the end.

Louis W. McGrath