

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000074650

**FILED**  
**Oct 20, 2010**  
**Secretary of State**

**Entity Name:** SCENIC FLORIDA REALTY, INC

**Current Principal Place of Business:**

13 TRIANGLE PARK PLAZA  
LAKE PLACID, FL 33852 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 305  
LAKE PLACID, FL 33862 US

**New Mailing Address:**

**FEI Number:** 59-1017415

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

JOHNSTON, SHELLEY S  
13 TRIANGLE PARK PLAZA  
LAKE PLACID, FL 33852 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** SHELLEY S. JOHNSTON

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** BOHANON, JOLENE  
**Address:** 41 BOHANON ROAD  
**City-St-Zip:** VENUS, FL 33960 US

**Title:** VP  
**Name:** BOHANON, JOLENE  
**Address:** 41 BOHANON ROAD  
**City-St-Zip:** VENUS, FL 33960 US

**Title:** S  
**Name:** BOHANON, JOLENE  
**Address:** 41 BOHANON ROAD  
**City-St-Zip:** VENUS, FL 33960 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JOLENE BOHANON

PVPS

10/20/2010

Electronic Signature of Signing Officer or Director

Date