

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

10 NOV 12 AM 11:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000009784

1. Corporation Name

Florida I.R.E., Inc.

2. Principal Office Address - No P.O. Box #

212 E. Highland Drive

3. Mailing Office Address

212 E. Highland Drive

Suite, Apt. #, etc.

Suite 201

Suite, Apt. #, etc.

Suite 201

City & State

Lakeland, FL

City & State

Lakeland, FL

Zip

33813

Country

USA

Zip

33813

Country

USA

REINSTATEMENT 08-10

CR2E081 (6/10)

4. Date Incorporated or Qualified

To Do Business in Florida 01/29/1997

5. FEI Number

65-0907556

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

Wall Foss Financial, LLC

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

212 E. Highland Drive

Suite, Apt. #, Etc.

Suite 201

City

Lakeland

State

FL

Zip Code

33813

700187705307
11/12/10--01050--002 **1050.00

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 10/26/10

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	Richard P. Turner	South Lodge, Ropsley	Grantham, Lincolnshire, NG33 4AS, UK
D	Nicholas J. Turner	South Lodge, Ropsley	Grantham, Lincolnshire, NG33 4AS, UK

10. E-mail Address: BTitus@wallfoss.com

(To be used for future annual report notification)

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. I further certify 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:

Nicholas J. Turner

NICHOLAS J. TURNER

10-26-10

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #