

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Hargis
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

99 AUG 19 PM 1:59

DOCUMENT # P97000077147

1. Corporation Name **Florida Realty Analysts, Inc.**

Principal Place of Business Mailing Address
1722 Grand Oak Drive
Apopka, FL 32703

REINSTATEMENT 98-99

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable 407 Wekiva Springs Road Suite, Apt. #, etc. Suite 361 City & State Longwood, FL Zip 32779 Country Seminole		3. New Mailing Office Address, if Applicable Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida 9/5/97	
				5. FEI Number 59-3467233 Applied For Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> SR 75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P, T	Donald P. Oehlrich	407 Wekiva Springs Road Suite 361	Longwood, FL 32779
S	Rhonda R. Burns-Oehlrich	407 Wekiva Springs Road Suite 361	Longwood, FL 32779

8000002958938-9
 -08/24/99--01080--002
 ****908.75 ****908.75
 8/16/99

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Donald P. Oehlrich
1722 Grand Oak Drive
Apopka, FL 32703

Name **Donald P. Oehlrich**
 Street Address (P.O. Box Number is Not Acceptable)
407 Wekiva Springs Road
 Suite, Apt. #, Etc. **Suite 361**
 City **Longwood** State **FL** Zip Code **32779**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent **Donald P. Oehlrich**
 REGISTERED AGENT MUST SIGN

Date **8/16/99**

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☒ No ☐

(See other side for information on intangible tax.)

12. 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: **Donald P. Oehlrich**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/16/99 (407) 862-7070
 Date Daytime Phone #

CR2E001 (12/98)