

PLEASE READ ALL INSTRUCTIONS BEFORE COMP

APPLICATION FOR REINSTATEMENT



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

FILED
Jan 03 2000 8:00 am
Secretary of State

DOCUMENT # P98000021741

1. Corporation Name

III DERS REALTY CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

492 MILE POST COURT
LAKE MARY FL 32746

Bill Green
497 Flora Creek Ct.
Lake Mary, FL 32746

492 MILE POST COURT
LAKE MARY FL 32746



REINSTATEMENT 1999

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

2. New Principal Office Address, If Applicable

497 FLORA CREEK CT.
LAKE MARY, FL

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

03/09/1998

5. FEI Number

59-3497705

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED

\$8.75 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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	WILLIAM B. GREEN	SAMZ	SAMZ

4000003103894--2
-01/20/00--01024--009
***750.00 ***750.00

8. Name and Address of Current Registered Agent

GREEN, WILLIAM B.
492 MILE POST COURT
LAKE MARY FL 32746

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

WILLIAM B. GREEN
REGISTERED AGENT MUST SIGN

Date 10-31-99

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided 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:

WILLIAM B. GREEN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-31-99
Date

4074153002
Daytime Phone #

CR2E040 (8/99)