

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 SEP 17 AM 10:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S 93030**

1. Corporation Name

Realty Center Inc.

REINSTATEMENT 02-03

2. Principal Office Address

3621 Park St. N.

Suite, Apt. #, etc.

3. Mailing Office Address

569 Crystal Dr

Suite, Apt. #, etc.

City & State

St Petersburg

Zip

33710

Country

Pineellas

City & State

Madeira Beach, FL

Zip

33708

Country

Pineellas

4. Date Incorporated or Qualified
To Do Business in Florida

11-12-91

5. FEI Number

59-3092204

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

Richard Hehl

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

569 Crystal Dr

Suite, Apt. #, Etc.

City

Madeira Beach

State

FL

Zip Code

33708

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

9-12-03

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
P	Betty Hehl	116 Buttonwood	Seminole, FL 33777
T/S	Richard Hehl Jr	569 Crystal Dr.	Madeira Bch, FL 33710

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/12/03 7274583463

Date

Daytime Phone #

CR2E081 (10/02)

9/17

REALTY CENTER INC.

A Licensed Real Estate Brokerage
COMMITTED TO EXCELLENCE IN THE REAL ESTATE PROFESSION



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


RE: Reinstatement of Realty Center Inc.

To Whom it may concern,

Enclosed is the past due amount for Realty Center inc annual corporate fees of \$300 and the reinstatement form. I am asking for the state to waive the reinstatement fees in that I never received a renewal notice. My late husband, Richard Hehl Sr. who passed away last year, handled the corporate paperwork and accounting in the past and I was unaware of the timing of this liability.

Please accept the enclosed fee to reinstate this corporation so we can continue business as usual.

Respectfully


Betty Hehl
President