

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



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

FILED

00 DEC 26 PM 3:59

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT #

1. Corporation Name

L + A AFFORDABLE HOMES, INC.

P980000106049

2. Principal Office Address

3008 Yukon
TAMPA FL 33604

3. Mailing Office Address

3008 Yukon
TAMPA FL 33604

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33604

Country

HILLSBRO

Zip

33604

Country

HILLSBRO

4. Date Incorporated or Qualified
To Do Business in Florida

12-22-1998

5. FEI Number

62-796-7700

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

LOCKE, HAROLD

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

3008 Yukon

Suite, Apt. #, Etc.

City

TAMPA

State

FL

Zip Code

33604

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

Harold Locke
REGISTERED AGENT MUST SIGN

Date 10/29/00

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
S	LOCKE, ELEANOR SECRETARY	8726 27th	TAMPA FL 33604
T	LOCKE, JESSE TREASURER	5763 Himes	TAMPA FL 33612
P	LOCKE, HAROLD President	3008 Yukon	TAMPA FL 33604
VP	DANIEL ALONSO Vice President	5810 HENRY	TAMPA FL 33602

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:

Harold Locke

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/29/00 813-933-7138

Date

Daytime Phone #

CR2E081 (8/99)