


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 JAN 14 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 720885

1. Corporation Name
The Chapel-By-The-Sea

2. Principal Office Address
100 CHAPEL ST
Suite, Apt. #, etc.

3. Mailing Office Address
PO Box 2997
Suite, Apt. #, etc.

REINSTATEMENT 03-04

City & State
FT MYERS BEACH FL

City & State
FT MYERS BEACH FL

Zip Country
33931 USA

Zip Country
33937 USA

4. Date Incorporated or Qualified To Do Business in Florida
5/5/71

5. FEI Number
59-1163471

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
ROGER S. WELTON

Street Address (P.O. Box Number is Not Acceptable)
7263 Bay Beach Ln #114

Suite, Apt. #, Etc.
7

City
FT. MYERS BEACH

State
FL

Zip Code
33931

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] (Roger S. Welton)

Date
1/7/05

REGISTERED AGENT MUST SIGN

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
V.P.	MARILYN FAY	15011 LAKESIDE VLEN DR #2403	FT MYERS, FL 33919
JOY	NEIL CALLAHAN	18420 CUTLASS DR	FT MYERS BEACH, FL 33931
Treas	M. CHARLES GOLDEN	210 RED FISH RD	FT. MYERS BEACH, FL-33931
PRES	DONALD CADY	7841 BUCCANER DR	FT MYERS BEACH, FL 33931

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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] TRASURER

SIGNING OFFICER, DIRECTOR

Date
763-4436

Daytime Phone #

CR2E01 (01/04)