

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

05 OCT 14 PM 2: 21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G 19185**

1. Corporation Name
Glenwood Properties, Inc.

2. Principal Office Address
4731 SW 178 Ave.

3. Mailing Office Address
5280 SW 186 Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Southwest Ranches, FL

City & State
Southwest Ranches, FL

Zip
33331

Country

Zip
33332

Country

4. Date Incorporated or Qualified
To Do Business in Florida 1/18/83

5. FEI Number
592236925

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
Debra Whitice Hamer

Street Address (P.O. Box Number is Not Acceptable)
4731 SW 178 Ave.

Suite, Apt. #, Etc.

City
Southwest Ranches,

State
FL

Zip Code
33331

800058206778
08/03/05--01070-002 ***1500.UU

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 Debra Whitice Hamer
REGISTERED AGENT MUST SIGN

Date 9-13-05

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
D	Debra Whitice Hamer	5280 SW 186 Ave.	Southwest Ranches, FL 33332
D	William Dale Whitice	4731 SW 178 Ave.	Southwest Ranches, FL 33331
D	Cheryl Whitice Dotson	4613 Barclay Lane	Tallahassee, FL 32309

REINSTATEMENT 97-05

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: Debra Whitice Hamer (Debra Whitice Hamer)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date
7/19/05

Daytime Phone #
954-680-4546

CR2E081 (01/05)