PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT 00-01 0B2

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT -1 PM 2:44

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DOCUMENT # N03264

1. Corporation Name

GLENNSHORES CONDOMINIUM ASSOCIATION, INC.

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-10/04/01--01053--029
****131.25 ****131.25

2. Principal Office Address	**3.** Mailing Office Address
451 S. Lucerne Ave	P.O. Box 18044
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Tampa, FL.	Tampa, FL.
Zip: 33606 Country: U.S.A	Zip: 33679 Country: U.S.A

4. Date Incorporated or Qualified To Do Business in Florida: 1987

5. FEI Number: ☐ 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: KAMEL M. ISSA

Street Address (P.O. Box Number is Not Acceptable): 451 S. Lucerne Ave

Suite, Apt. #, Etc.:

City: Tampa | State: FL | Zip Code: 33606

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: Kamel M. Issa — REGISTERED AGENT MUST SIGN — Date: 9/1/01

CR2E081 (9/00)

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
VD	KAMEL ISSA (VICE PRESIDENT)	451 S. Lucerne Ave	Tampa, FL. 33606
TD	SHARON ISSA (TREASURE)	451 S. Lucerne Ave	Tampa, FL. 33606
PD	HAROLD SAMHAT (PRESEDEN)	8140 Manasota Key Rd	Englewood, FL. 34223
DST	FLINORE SAMHAT SAMHAT	8140 Manasota Key Rd	Englewood, FL. 34223

AM w/3

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: Kamel M. Issa KAMEL M. ISSA 9/1/01 813-258-3046 813-380-8044

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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9/1/01

To: Florida Dep of State

From: Glenns Lake Condominium Association, Inc

In 1999 it was the last time I recieved a renewal for this Corporation at my old address, since we changed the address we never get any renewal papers and we didn't notice it until now, Enclosed is a check for the renewal for 2 years $ $8.75 for ~~cert~~ certificate of state, and Please if there any late fees please maind that because we never get the renewal papers.

If there is any question or if you need any information you can call my at

(813) 258-3046

Cell (813) 380-8044

and our mailing address is

P. O. Box 18044

Tampa, FL. 33679.

Thank you

Janet M. Ivey