


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name Garden City Resort Homeowners Association Phase I Inc. N46241			
2. Principal Office Address 7310 Cherry Lake Road Suite, Apt. #, etc.		3. Mailing Office Address Suite, Apt. #, etc.	
City & State Groveland		City & State 	
Zip Florida	Country Lake	Zip 34736	Country USA

FILED
03 SEP 26 AM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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10/02/03--01064--003 **245.00

00- 03 UBR

4. Date Incorporated or Qualified To Do Business in Florida 11/27/91	
5. FEI Number 59-3107803	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name Ahmed El Difrawi / ECAD Florida Corporation	
Street Address (P.O. Box Number is Not Acceptable) 7310 Cherry Lake Road	
Suite, Apt. #, Etc. 	
City Groveland	State FL
	Zip Code 34736

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

Ahmed El Difrawi

REGISTERED AGENT MUST SIGN

Date 09/12/2003

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	Rafiah Kashmiri	16650 Royal Palm Drive	Groveland, FL 34736
D	Mohammad Nasr	17132 Royal Palm Drive	Groveland, FL 34736
D	Valerie Ismail	17014 Royal Palm Drive	Groveland, FL 34736

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:

Rafiah Kashmiri
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/12/03
Date

407 540 0920
Daytime Phone #

CR2E081 (10/02)

GARDEN CITY HOMEOWNERS ASSOCIATION PHASE I

July 29, 2003

Department of State
Division of Corporations/Uniform Business Reports
P.O. Box 1500
Tallahassee, Florida 32302-1500

To Whom It May Concern:

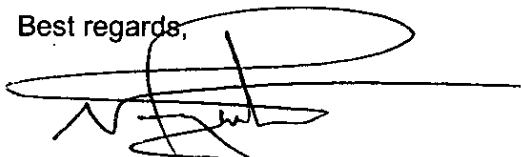
Per my conversation with your office today, I am attaching a check in the amount of \$245.00 to reinstate the Florida Non Profit Company, "Garden City Resort Homeowners Association Phase I, Inc." Further, I ask that you waive the reinstatement fee of \$175.00 as we never received our UBR Form and in fact was returned to your office.

Therefore please return the company with FEI Number 59-3107803 to "Active" status.

Also, please note the new mailing address below.

Thank you in advance.

Best regards,



Mohammad Nasr
President
Garden City Homeowners Association