## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT  FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS  DOCUMENT # N910000126  1. Corporation Name  Slenhaven Mobile Home Association, Inc. 3543 Glenhaven Circle  Zephyrhills Florina, 33541  2. Principal Office Address - No P.O. Box #  3. Mailing Office Address						* REI	O9 MAR 30 AM 8: 29  SECRETARY OF STATE TALLAHASSEE, FLORIDA  NSTATEMENT  O144617421 7/0901034007 **236 CR2E081 (12/08)
Suite, Apt. #, etc.			Suite, Apt. #, etc.				
City & State  Zip Country			City & State  Zip Country			To Do Bus  5. FEI Number	porated or Qualified iness in Florida 2 - 2 3 - 9 9  Property Applied For Not Applicable
	000	• •	1 2.5		Country	6. CERTIFICATI	E OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
Name  Name  Name  Name  Name  Name  Name  Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.  City				The reinstatement fee is imposed, circumstances which the entity did in the prior notices. By checking this are certifying the prior notices.			sinstatement fee is imposed, except in stances which the entity did not receive or notices. By checking this box, you ertifying the prior notices were not ed and requesting the reinstatement waived.
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  REGISTERED AGENT MUST SIGN  Date    Peb-21, 2009							
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
	Ken Radtke			3631 Glenhaven Circle			ZapyhL'112 F1.33541
VierP	Jim Thompson			3750 Glanhoven Civola			2. physhills 61, 33541
So et -	John Lynch				3643 Glenhaver Circle Zephyrhills, F1, 3354		
Treas. Za	140m	F. Pog	2007	354	3 Clarker	en Circle	Zepyrhills 1 F1, 33541
124 NE 3	VP Jim Cotter				3637 Glanhaven Circle Zephynhills, F1, 33541		
P. 7 (m) -3,	ann	. 5 chu	142	3 7°	os Glenhan	es Circle	Zephyrhills, F1, 33541
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 filling 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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Devilme Phone #							

Glen Haven Mobile Homeowners Assoc.

Ken Radtke, President

3631 Glen Haven Circle

Zephyrhills, FL 33541

March 16, 2009

Andy Dunlap, Document Specialist Supervisor

Florida Department of State, Division of Corporations

Re: Letter Number: 209A00007064

Dear Sir:

I am writing to ask your help with the filing of our reinstatement.

I would ask that you consider the following:

- 1. I was not aware until after taking office in Feb., 2009, that the 2008 Annual Report had not been filed.
- 2. The 2008 filing notice was sent to the previous General Agent's address, who had passed away.

Therefore, I would ask you to consider the abatement of the \$175.00 penalty fee required for reinstatement. If this is possible, I would appreciate it as we are a very small HOA of only 52 members.

Thank you for your consideration on this matter.

Ken Radtke

Glen Haven Mobile Homeowners Association