

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED 00 OCT 30 AM 9:16 SECRETARY OF STATE TALLAHASSEE FLORIDA

DOCUMENT # P95000056754

1. Corporation Name CHAPEL DEVELOPMENT, INC.

Principal Place of Business 6641 GENTLE BEN CIR WESLEY CHAPEL FL 33543 Mailing Address 6641 GENTLE BEN CIR WESLEY CHAPEL FL 33543



REINSTATEMENT logo

2. New Principal Office Address, If Applicable 6000 Gentle Ben Circle Wesley Chapel, FL 33544 3. New Mailing Office Address, If Applicable, 6000 Gentle Ben Circle Wesley Chapel, FL 33544

4. Date Incorporated or Qualified To Do Business in Florida 07/20/1995 5. FEI Number NOT APPLICABLE 6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Table with 4 columns: Title(s), Name of Officers and/or Directors, Street Address of Each Officer and/or Director, City / State / Zip. Entry: D MEYER, CINDY 3743 SANDALWOOD DR LAND O' LAKES FL 34639

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8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

O'MALLEY, ANDREW M 100 S ASHLEY DR SUITE 1190 TAMPA FL 33602

Name CINDY MEYER-WEBB Street Address (P.O. Box Number is Not Acceptable) 6000 Gentle Ben Circle Suite, Apt. #, Etc. Wesley Chapel, FL 33544

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN Date 10/17/00

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided 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.

KE

SIGNATURE: Cindy Meyer, Director Date 10/17/00 Daytime Phone # (813) 973-1318

CR2E040 (8/00)