

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

00 MAY 19 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

PA7000010887

1. Corporation Name GLOBAL PROPERTIES OF NAPLES, INC.
2154 Trade Center Way
Suite #4
Naples, Florida 34109

2. Principal Office Address
2154 Trade Center Way

Suite, Apt. #, etc.
#4

City & State
Naples, Florida 34109

Zip Country
34109 USA

3. Mailing Office Address
2154 Trade Center Way

Suite, Apt. #, etc.
#4

City & State
Naples, Florida

Zip Country
34109 USA

REINSTATEMENT

09:00

4. Date Incorporated or Qualified To Do Business in Florida
2/4/97

5. FEI Number 59-3507098
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
Anthony M. Lawhon, Parrish, White, Lawhon, Moore, P.A.

Street Address (P.O. Box Number is Not Acceptable)
2171 Pine Ridge Road, Suite D

Suite, Apt. #, Etc.
D

City
Naples,

700003283447 - 8
-06709700-01092-1028
***300.00 ***300.00

State Zip Code
FL 34109

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 *[Signature]*
REGISTERED AGENT MUST SIGN

Date *5/16/00*

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
PD	Lana Kaye Dargai	2154 Trade Center Way #4	Naples, Florida 34109
VP	Albert J. Galy	2154 Trade Center Way #4	Naples, Florida 34109
ST	Kimberly T. Reshey	2154 Trade Center Way #4	Naples, Florida 34109

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: *Lana Kaye Dargai* President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Lana Kaye Dargai

941-596-1330
Date Daytime Phone #

CR2E081 (9/99)