PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Pg. 1 of 2

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 DEC 15 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[redacted]

DOCUMENT # 218665

1. Corporation Name

SWAN'S GROVE THREE, INC.

Principal Place of Business	Mailing Address
731 ROCK CREEK LOOP LONGWOOD FL 32750 US	731 ROCK CREEK LOOP LONGWOOD FL 32750 US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: **12/31/1958**

5. FEI Number: **59-1005160** ☐ Applied For ☐ 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	SWAN, JACK W	PO BOX 1232 N/A	DUNDEE, FL 33838
D	WOOTEN, DOROTHY	731 ROCK CREEK LOOP	LONGWOOD FL
VD	SWAN, JAMES F	257 N MILITARY TRL	W PALM BCH, FL 0
VD	SWAN, ETTA J	4024 BILLINGSGATE RD	ORLANDO, FL 00000
SVD	SWAN, JAMES W	731 ROCK CREEK LOOP	LONGWOOD, FL 00000

12-16-97

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
SWAN, JAMES W 731 ROCK CREEK LOOP LONGWOOD FL 32750	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State / Zip Code

100002377991--0
-12/19/97--01085--009
****165.00 ****165.00

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 _____ Date _____

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. 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: James W. Swan 12-13-97 352-787-2185

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

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November 24, 1997

Swan's Grove Three
731 Rock Creek Loop
Longwood, Florida 32750

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314-6327

Dear Sir:

Mr. James W. Swan issued a check in January 1997 for the annual Fee which, apparently, was lost somewhere in the system because the check never cleared.

Mr. Swan is 89 years old and did not realize that this check never cleared. He also did not receive any other delinquent notices.

Because of the corporation's record of never being late, we believe forgiveness of the delinquent fee is warranted.

Robert A Blakeney
Robert A Blakeney