

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



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

DOCUMENT # 7208181

1. Corporation Name

SESAME GROTTTO OF POLK COUNTY HOLDING
CORPORATION, INC.

2. Principal Office Address

3030 MORGAN COMBEE RD.

Suite, Apt. #, etc.

City & State

LAKELAND FL

Zip

33801

Country

USA

3. Mailing Office Address

3030 MORGAN COMBEE RD.

Suite, Apt. #, etc.

City & State

LAKELAND FL

Zip

33801

Country

USA

REINSTATEMENT 99-00

**4. Date Incorporated or Qualified
To Do Business in Florida**

04/28/71

5. FEI Number

237089447

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

JAMES R. "RUSTY" FRANKLIN

Street Address (P.O. Box Number is Not Acceptable)

215 IMPERIAL BOULEVARD

Suite, Apt. #, Etc.

SUITE C-3

City

LAKELAND

State

FL

Zip Code

33803

500003419895-7

-10/10/00-01007-005

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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

9/20/00

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
DIR.	EDWARD LEE LOWE	3034 MORGAN COMBEE RD.	LAKELAND FL 33801
DIR.	BRUCE ZELONKY	55 COLEMAN ROAD	WINTER HAVEN FL 33880
DIR.	DAVID PIATT	PO BOX 91773	LAKELAND FL 33804

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:

[Signature] RICHARD PARKER
VICE PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9/19/2000 863 686-6522

Daytime Phone #

CR2E081 (9/99)