

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

98 AUG 31 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 752674

1. Corporation Name
LANDT-TRI CONDOMINIUM ASSOCIATION, INC
MAILING ADDRESS: 11800061780

Principal Place of Business Mailing Address
225-116TH AV
TREASURE ISLAND, FL 33706

700002634877--4
-09/09/98--01035--011
****796.25 ****796.25

REINSTATEMENT 89-98

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

2. New Principal Office Address, if Applicable
Suite, Apt. #, etc.
City & State
Zip Country

3. New Mailing Office Address, if Applicable
Suite, Apt. #, etc.
City & State
Zip Country

156 RAMON WAY NE
ST. PETERSBURG FL
33704 USA

4. Date Incorporated or Qualified To Do Business in Florida
MAY 29, 1980

5. FEI Number
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
P/D	TRINA ESPINOLA, MD	601-7th ST S.	ST PETERSBURG FL 33701
T/D	CHERYL CARLSON	156 RAMON WAY NE	ST. PETERSBURG FL 33704
S/D	JOHN NOBLE	39824 BUSH LINE	ST THOMAS, ON NSP 359

8. Name and Address of Current Registered Agent

N/A

9. Name and Address of New Registered Agent

Name Charles A. Carlson
Street Address (P.O. Box Number is Not Acceptable) 601 Bayshore Blvd.
Suite, Apt. #, Etc. Ste 700
City Tampa
State FL Zip Code 33606

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
CMA.L
REGISTERED AGENT MUST SIGN

Date 9/13/98

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: Cheryl Carlson CHERYL CARLSON 7/24/98 (727) 821-9300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (1/98)