PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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DOCUMENT # 752783

1. Corporation Name

SAINT JUDES DRIVE SOUTH CONDOMINIUMS ASSOCIATION INC.

Principal Place of Business	Mailing Address
713 ST JUDES DRIVE SOUTH #1 LONGBOAT KEY FL 34228	~~713 ST JUDES DRIVE SOUTH #1~~ ~~APT 1~~ ~~LONGBOAT KEY FL 34228~~ ~~US~~

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

REINSTATEMENT 01

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.: 4134 Gulf of Mexico Dr Suite 207	Suite, Apt. #, etc.: c/o ACT Inc.
City & State: Longboat Key, FL.	City & State:
Zip: 34228 Country: MANATEE	Zip: Country:

4. Date Incorporated or Qualified To Do Business in Florida: 06/04/1980

5. FEI Number: 65-0135372 ☐ 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	4 City / State / Zip
~~PD~~ SD	~~KOZACK, MYRON~~ PAT SEGO	~~713 ST. JUDES DR.~~ 5730 W. Whiteland Rd.	~~LONGBOAT KEY FL 34228~~ Bargersville, In. 46106
TD	~~TOMLINSON, TOM~~ MARY LOU HAMM	~~7332 CLOISTER DR.~~ 707 ST Judes Dr So #4	~~SARASOTA FL 34231~~ LONGBOAT KEY, FL. 34228
~~SD~~ President	BALDWIN, EDWIN M.	707 ST. JUDES DR, #4	LONGBOAT KEY FL 34228
SD	~~WHITMAN, JANICE~~ DEBORAH AAYON	~~723 ST. JUDES DR, #2~~ 1522 Cottonwood Trail	~~LONGBOAT KEY FL 34228~~ SARASOTA, FL 34232
VD	~~DESSELLE, DON~~ JORGE ALEMAN	~~729 ST JUDES DR, #3~~ 3302 Spainwood Dr.	~~LONGBOAT KEY FL 34228~~ SARASOTA, FL 34232

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
BALDWIN, EDWIN M. 707 ST JUDDS DR #4 LONGBOAT KEY FL 34228	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State: FL / Zip Code

CR2E040 (8/01)

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: Edwin M. Baldwin SIGNATURE REQUIRED Date: 10-12-01

REGISTERED AGENT MUST SIGN

11. 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: Edwin M. Baldwin SIGNATURE REQUIRED 10-12-01 941-383-6595

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