PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

01-02 UBR

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # 761285

1. Corporation Name

S.L CONDOMINIUM ASSOCIATION III, INC.

2. Principal Office Address	3. Mailing Office Address
622 SPG LAKES BLVD.	MA-CON INC.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	2198 Princeton St. #20
City & State	City & State
Bradenton, FL 34210	Sarasota, FL 34237
Zip / Country	Zip / Country
34210 / US	34237 / US

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 59-2254691 ☐ 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
WEIL, WARREN
Street Address (P.O. Box Number is Not Acceptable)
2198 Princeton Street Ste#20
Suite, Apt. #, Etc.
City: Sarasota | State: FL | Zip Code: 34237

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 ✓ Warren Weil Date
REGISTERED AGENT MUST SIGN

CR2E081 (9/00)

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	NEMES, CAROL	624 Spring Lakes Blvd.	Bradenton, FL 34210
VPD	FEDROFF, MIKE	620 Spring Lakes Blvd	Bradenton, FL 34210
TD	AHLGREN, DONALD	622 Spring Lakes Blvd	Bradenton, FL 34210
SD	BENJAMIN, ROBERT	618 Spring Lakes Blvd.	Bradenton, FL 34210
D	HINE, MEL	626 Spring Lakes Blvd.	Bradenton, FL 34210

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: Carol Nemes - CAROL NEMES President 1-04-02 941-366-8480
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #