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| APPLICATION FOR OWN REINSTATEMENT | FLORIDA DEPARTMENT C Sandra B. Mortha Secretary of State | m FILED Pg , 19 | |
| DOCUMENT #766127 | DIVISION OF CORPORATION | 97 OCT -2 PM 3: 24 | |
| 1. Corporation Name The MARINA Club | of Tampa Cowdon ASSOCIATION IN | | |
| Principal Place of Business 2424W TAMPA BAYBIYD TAMPA, F1. 33604 | Mailing Address 8248. Fletcher TAMPA, FJ. 336 | -AVE 18 | |
| If above addresses are incorrect in any way, line thro | ough incorrect information and enter correct 3. New Mailing Office Address, if Applic | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | 4. Date Incorporated or Qualified To Do Business in Fig. 2 | |
| City & State | City & State | 5.5° Number Applied For Not Applied For | |
| Zip Country | Zip Country | 6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee regulred for a Certificate of Status | |
| 7. Names and Street Addresses of Each Officer and/i | | must list at least 3 directors) | |
| 1 Title(s) 2 and/or Directors P/D WALVOORD, KATHY | Officer a | Ind/or Director st Office Box Numbers) 4 City / State / Zip The BAY BIV d FROM DE TAMAN TO 33 (2003) | |
| 2124 W. TAMPA BAY BLY OF THE SID PAYNE, PAUL 3424 W. TAMPA BAY BLY OF THE AYAY W. TAMPA BAY BLY OF DECKERS, JO 2424 W. TAMPA BAY BLY OF D. MARTIN, AN THOM 2424 W. TAMPA BAY BL | #2018 2424 W TAM H2018 2424 W TAM NOW 2424 W TAM Y14/010 2424 W TAM Y14/010 2424 W TAM Y14/088 | -2018 TAMPA, FT. 33607 Ampa Bay BIVA + 2018 TAMPA, FT. 33607 PABAY BIVA + 1010 TAMPA, FT. 33607 TAMPA, FT. 33607 TAMPA, FT. 33607 TAMPA, FT. 33607 TO 1002313297-3 -10/06/97-01169-020 9. Name and Address of the ***** \$297.50 | |
| | Nan | | |
| LERNER, PATRICIA [420 West PLATT ST TAMPA, FI. 33607 | Suite | et Address (P.O. Box Number is Not Acceptable) e, Apt. #, PEINSTATEMENT 96-93 State Zip Address FL Zip Address | |
| 10. 1, 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 Date Date | | | |
| 11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. 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 filling 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: Hathy Walvard 9/22/917 885-4152 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 9/22/917 Bate Daytimo Phone # | | | |

| Planida Danartmant of State Sandra P. Martham Sadratary of State |
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| Florida Department of State, Sandra B. Mortham/Secretary of State AUG 14 1997 STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS |
| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FORICA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation is: The Marina Club of Tampa Condomply. |
| 2. The mailing address of the corporation is: 834 6. First chere Ave TAMPA, F1. 33612 |
| 3. Date of incorporation/qualification: 12 82 Document number: 766 27 4. The name and address of the current registered agent and office: |
| Mezer, Steven, P.A. 1212 Court St. StE.B Clear water, Fr. 34616 |
| 5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) |
| Lerner, Patricia, 420 West Platt St. Jampa, Fr. 33606 |
| The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical. |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board. |
| (Signature of an officer, chairman or vice chairman of the board) (Date) |
| Arky Walvoord President HOA (Printed or typed name and title) |
| Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the thousisions of all statutes relative to the proper and complete performance of my duties, and I am fightight with and accept the obligation of my position as registered agent. (Signature of Registered Agent) |
| If signing on behalf of an entity: |
| Patricia Leib-Lerner Altony Lerner Yonger (Typed or Printed Name) |