PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAY -7 PM 2:20

DOCUMENT # 766525

1. Corporation Name

DOCKSIDE OWNERS ASSOCIATION,INC.

REINSTATEMENT 88-03

2. Principal Office Address	3. Mailing Office Address
8526 LYDIA LANE	8526 LYDIA LANE #3
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	apt # 3
City & State	City & State
Panama City Beach, Fl	Panama City Beach, Fl
Zip / Country	Zip / Country
32408 / Bay	32408 / Bay

4. Date Incorporated or Qualified To Do Business in Florida 1/12/1983

5. FEI Number — X Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED X

7. Name and Address of Current Registered Agent

Name: Kenneth R. Stremski

Street Address (P.O. Box Number is Not Acceptable): 8526 Lydia Lane #3

800018451168
05/07/03--01051--005 **1225.00

Suite, Apt. #, Etc.: Apartment # 3

City: Panama City Beach, State: FL Zip Code: 32408

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 -Kenneth-R-Stremski- (REGISTERED AGENT MUST SIGN) Date May 8, 2003

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
pres.	Howard Dovre	P.O. Box 2123	Dothan,Al 36302
Tres	Kenneth R. Stremski	8526 Lydia Lane #3	Panama City Beach,Fl 32408
Sec.	Matthew Nissen	P.O. Box 9281	Panama City Beach, Fl 32417
Ex Board	John Cooper P.O. 7264	P.O. Box 7264	Panama City Beach, Fl 32407
Ex Board	Mike Groom	8526 Lydia Lane #4	Panama City Beach, Fl 32408

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: Kenneth R. Stremski 5/8/2003 850-234-1079
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #