

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 OCT 13 PM 3:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 812822

1. Corporation Name
Sandston Development Corporation

6600 West Broad Street
6600 West Broad Street

2. Principal Office Address
6600 West Broad Street

3. Mailing Office Address
6600 West Broad Street

Suite, Apt. #, etc.
Suite 100

Suite, Apt. #, etc.
Suite 100

City & State
Richmond, VA

City & State
Richmond, VA

Zip Country
23230 US

Zip Country
23230 US

4. Date Incorporated or Qualified
To Do Business in Florida 5/29/1958

5. FEI Number
52-0793169

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 83-04

7. Name and Address of Current Registered Agent

Name
Manuel Diaz Jr.

Street Address (P.O. Box Number is Not Acceptable)
1920 Meridian Avenue

Suite, Apt. #, Etc.
2nd Floor

City
Miami Beach

State Zip Code
FL 33139

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 Manny Diaz
REGISTERED AGENT MUST SIGN

Date 10-11-04

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
P,D	Jerome Gumenick	6600 West Broad Street, Suite 100	Richmond, VA 23230
VP,S,D	Nancy G. White	784 Tramore Lane	Naples, FL 34108

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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)(l), 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: Nancy G White Nancy G White 10/7/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (01/04)