

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

02 MAY 17 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 827123

1. Corporation Name

Tara Mobile Homes, Inc.

2. Principal Office Address

6218 West Shores Rd.

Suite, Apt. #, etc.

3. Mailing Office Address

PO Box 487

Suite, Apt. #, etc.

City & State

Orange Park, FL

City & State

Orange Park, FL

Zip

32003

Country

USA

Zip

32067

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

Dec. 2, 1971

5. FEI Number

58-0915866

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

Robert C. Ryle

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

1509 Maple Leaf Lane

Suite, Apt. #, Etc.

City

Orange Park

800005634168-7

06/06/02-01033-004

***335.00 ***335.00

State
FL

Zip Code

32003

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

Robert C. Ryle

REGISTERED AGENT MUST SIGN

Date 5-15-02

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.	Robert C Ryle	1509 Maple Leaf Lane	Orange Park, FL 32003
V Pres.	Anita Ryle	1509 Maple Leaf Lane	Orange Park, FL 32003
Secy/Dtr	Bobbie A. Todd	6218 West Shores Rd.	Orange Park, FL 32003

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:

Robert C. Ryle

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5-15-02

Daytime Phone #

CR2E081 (9/01)

PO Box 487
Orange Park, Florida
32067

April 18, 2002

Florida Dept. of State
Florida Dept. of State
Division of Corporations
PO Box 6327
Tallahassee, Florida
32314

Attention: Chief Bureau of Corporate Records

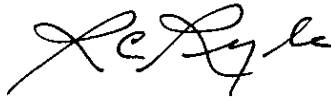
Dear Florida Dept. of State,

Subject: Annual Report for Charter # 827123

We have been notified that the Annual Report has not been filed for Tara Mobile Homes, Inc. We feel that this is a result of a change of address to our PO Box. Subsequently, we were instructed by our accountant to send a fee of \$500. for late filing. Please find enclosed a check for \$500. a check per our accounting firm's instructions. Should other items be needed, please contact us at the above address.

Your prompt attention to this matter is greatly appreciated.

Sincerely yours,



R.C. Ryle
President
Tara Mobile Homes, Inc.

BT

Enclosed -- \$ 335. -- as per your request
4 certificates requested.