


FILED
05 DEC -8 PM 1:30
FBI - MEMPHIS

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 05 DEC -8 PM 1:30	
DOCUMENT # F41039							
1. Corporation Name SYKES CREEK Property, Inc.							
2. Principal Office Address 1308 Riverside Dr. Suite, Apt. #, etc.				3. Mailing Office Address 1308 Riverside Dr. Suite, Apt. #, etc.			
City & State Titusville Fla.				City & State Titusville, Fla.			
Zip 32780		Country USA		Zip 32780		Country USA	
4. Date Incorporated or Qualified To Do Business in Florida 8/19/81						5. FEI Number 131937069	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>						\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent							
Name Dwight W. Sevens							
Street Address (P.O. Box Number is Not Acceptable) 1308 Riverside Dr.							
Suite, Apt. #, Etc.							
City Titusville						State FL	Zip Code 32780
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 Dwight W. Sevens						Date 12/5/05	
REGISTERED AGENT MUST SIGN							
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/5	Dwight W. Sevens (Dwight W. Sevens)	1308 Riverside Dr.		Titusville Fla 32780			
REINSTATEMENT 02-05200062021372 12/08/05--01046--019 **1200.00							
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: Dwight W. Sevens 12/5/05-321-264-276							
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR						Date	Daytime Phone #