PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

RECEIVED AND FILED
98 NOV 30 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F91275

1. Corporation Name

HEARTLAND HOMES, INC.

Principal Place of Business	Mailing Address
~~12711 EAGLE POINTER CIR~~ FT. MYERS FL ~~33913~~ US	~~12711 EAGLE POINTE CIR~~ FT. MYERS FL ~~33913~~ US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 98

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
7723 CAMERON CIR.	7723 CAMERON CIR.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip 33912 / Country	Zip 33912 / Country

4. Date Incorporated or Qualified To Do Business in Florida: 07/20/1982

5. FEI Number: 59-2408703 ☐ Applied For ☐ Not Applicable

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

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PST	NUNEZ, WILLIAM	~~12711 EAGLE POINTER CIR~~ 7723 CAMERON CIR.	FT. MYERS FL 33912
			400002705294--8
			-12/08/98--01057--002
			****750.00 ****750.00
			12/3

8. Name and Address of Current Registered Agent

NUNEZ, WILLIAM
~~12711 EAGLE POINTER CIR~~
FT. MYERS FL ~~33913~~

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable): 7723 CAMERON CIRCLE
Suite, Apt. #, Etc.
City | State: FL | Zip Code: 33912

CR2E040 (9/98)

10. I, 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: SIGNATURE REQUIRED — REGISTERED AGENT MUST SIGN Date: 11-27-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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 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: SIGNATURE REQUIRED President 11/27/98 941 565 1963
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #