PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS				SECRETARY OF STATE DIVISION OF CORPORATIONS O7 MAY 14 AM 5: 34	
DOCUMENT # J/95/7							
1. Corporation Name Cedar Creek Mari wa, Iwa							00103520940
P/B/A highthouse Marine						95/3	00103520940 9/9701021019 **1358.75
property bight house their						REI	NSTATEMENT
2. Principa 543		JUAN Ave	3. Mailing Office Address				99-07 CR2E081 (1/07)
Suite, Apt. #	<u>' </u>	//-	Suite, Apt. #, etc.				CIZEOUT (1107)
							porated or Qualified iness in Florida 6/16/8L
City & State TACH	ksavville	L, FL.	City & State	City & State			Applied For Not Applicable
2ip 322	210 Sountry 21		Zip		Country	6	E OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current				tered Ager	rt .		
Name HOWARD W. BRODY					The re		einstatement fee is imposed, except in
Street Address (P.O. Box Number is Not Acceptable)						circumstances which the entity did not receive the prior notices. By checking this box, you	
8522 Alderwood Ct. Suite, Apt. #, Etc.					are		ertifying the prior notices were not ed and requesting the reinstatement
City					State Zin Code		waived.
JACKSONVILLE State Zip Code FL 32210							
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						Date 8/12/8フ	
REGISTERED AGENT MUST SIGN							
	and Street Add	resses of Each Officer a	nd/or Director (Fic	/or Director (Florida nonprofit corporations must list at le Street Address of Each			T
Titles		Officers and/or Director	_		Officer and/or Directo		City / State / Zip
P	Vicki L. DAVIS-BRODY			8522 Alderwood Ct.		Ct.	JACKOONVIlle, FL 32210
VP	HOWARD N. BRODY			8522 Alderwood Ct.		C+·	JACKSONVILLE, FL. 32210
5	BARBARA Poremba			951 Aspen Ridge Ct.			Orange PARK, FL. 32065
T	William Poremba			957 Aspen Ridge Ct.		•	Orange PARK, FL. 32065
VP	Curtis L. JOHNSON			7176 MATTHEW ST.			JACKSONVIIle, FL. 32210
AVP	Marshall Waldeck			8236 CARAVEILE DR.			Jacksonville, FL. 32244
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 contained in Chapter 119, 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 cath.							
SIGNATURE Willy L. Davis - Brody Vicki L. DAVIS - BRODY May 10, 2007 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daysimo Phono # 904-384							
			V				704-207