PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.								
			DEPARTMENT OF STATE			APPROVED AND FILED		
DOCUMENT # J69064					96 DEC 24 AM 9: 31			
1. Corporation Name Gators on the Pass, Inc.					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
<del></del>						IALLAMASSEC, FLORIDA	`	
Mailing Address Principal Place of Business 12765 Kingfish Drive 12765 Kingfish Drive				TP.				
Treasure Island, FL 33706 Treasure Island, FL 33706								
If above addresses are incorrect in any way, line through incorrect information and enter correction below.  2. New Mailing Address, If Applicable  3. New Principal Office Address, If Applicable					DO NOT WRITE IN THIS SPACE  4. Date Incorporated or Qualified			
Suite, Apt. 4	· .	Suite, Apt. #, etc.			To Do Business in Florida 4/21/1987			
	Kingfish Drive	12765 Kingfish Dri		ive	5. FEI Number Applied For 59–2848841 Not Applicable			
Zip Country Zip			Country		6. CERTIFICATE OF STATUS DESIRED CONTROL CONTR			
7 Names	and Street Addresses of Each Officer and/o	Disorder (Florida	accordit comoral	sees must list at lan		A MAGE	Certificate of Status ::	
	Name of Officers	or Director (Florida)	Stre	el Address of Each		City / State /	7:0	
Title(s)	and/or Directors	3 (Do NOT Us		cer and/or Director e Post Office Box N	lumbers)	4		
P/D	Agnes E. Rice	5 E. Rice 12765 Ki		gfish Driv	re 	Treasure Island	, FL 33706	
	400002039644-						442	
					****383.75 ****383.75			
	REIN				STATEMENT 1996			
,				# fame.		4. A	un,	
8. Name and Address of Current Registered Agent					9. Name and Address of New Registered Agent / 0 4/46 Name			
Agnes E. Rice					(D.O. Pay Number is Not Acceptable)			
12789 Kingfish Drive Treasure Island, FL 33706				Street Address (P.O. Box Number is Not Acceptable) 12765 Kingfish Drive				
				Suite, Apt. #, Etc.				
				Treasure Island State Zip Code FL 33706				
10. I, being appointed the registered agent of the above named corporation, am famillar with and accept the obligations of Section 607.0505, F.S.								
Signature of Registered Agent								
11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box additional information.)								
12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No								
13 I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I release the Divisior, of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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 filling this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of socilon 607.0401 or 617.0401, F.S., and that all less owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under eath.								
SIGNATURE: COMUNIC RICE AGRICE AGRICE 12/23/96 813-360-3405 SIGNATURE: Date Date Date Date Date Date Date Date								