

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR 93-97
REINSTATEMENT



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

APPROVED
AND
FILED

97 AUG -6 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K96129

1. Corporation Name

ORLANDO RIVIERA PROPERTIES, INC

Principal Place of Business

Mailing Address

7031 GRAND NATIONAL DRIVE
ORLANDO, FL 32819
SUITE 100A

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

6/16/1989

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59-2961072

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☒

\$6.75 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PSD	LEBEAUPIN, GEORGE	3750 SILVER ROSE CT.	ORLANDO, FL 32808
VD	HARPER, DANIEL	7031 GRAND NATIONAL DR	ORLANDO, FL 32819
			600002260946--9 -08/07/97--01096--005 ***2672.50 ***2672.50 1588.75

REINSTATEMENT 93-97

Q. Alan
8-6-97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LEBEAUPIN, GEORGE
3750 SILVER ROSE CT.
ORLANDO, FL 32808

Name
HARPER, DANIEL E.
Street Address (P.O. Box Number is Not Acceptable)
7031 GRAND NATIONAL DR.
Suite, Apt. #, Etc.
100-A
City
ORLANDO
State
FL
Zip Code
32819

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

Daniel E. Harper

REGISTERED AGENT MUST SIGN

Date 8/4/97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANIEL E. HARPER

Date 8/4/97 Daytime Phone # 407-370-0093