

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

03 FEB -4 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L01000006863

Name and Mailing Address

0005755 01 FP 0.352 **PRST T8 0 0615 34209-142512



HILLCREST PLAZA, LLC
612 63RD STREET N.W.
BRADENTON FL 34209-1425

REINSTATEMENT



2002-
2003

2. New Mailing Address 1001-3rd AVE. W. Suite 354 City, State, Zip Bradenton FL 34205		4. State/Country of Formation FL																									
3. New Principal Place of Business Address 1001-3rd AVE. W. Suite 354 City, State, Zip Bradenton, FL 34205		5. Date Organized or Qualified To Do Business in Florida 05/02/2001																									
Principal Place of Business 612 63RD STREET N.W. BRADENTON FL 34209		6. FEL Number 05-1103000	Applied For Not Applicable																								
8. Name and Address of Current Registered Agent WICKMAN & WYCKOFF, P.A. 4909 MANATEE AVE. WEST BRADENTON FL 34209		9. Name and Address of New Registered Agent Name: DANA S. HATHORN Street Address (P.O. Box Number is Not Acceptable): 612-63rd ST. N.W. City: Bradenton FL Zip Code: 34209																									
10. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S. Signature of Registered Agent: [Signature] Date: 2/1/03 REGISTERED AGENT MUST SIGN																											
11. Names and Street Addresses of Each Managing Member/Manager <table border="1"> <thead> <tr> <th>Title(s)</th> <th>Name of Managing Members/Managers</th> <th>Street Address of Each Managing Member/Manager</th> <th>City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>MGR</td> <td>DANA S. HATHORN</td> <td>612-63rd ST. N.W.</td> <td>Bradenton, FL 34209</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip	MGR	DANA S. HATHORN	612-63rd ST. N.W.	Bradenton, FL 34209																
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CR2E084 (8/02)

12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company 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 oath.

Signature of Managing Member/Manager: [Signature] Date: 2/1/03 Daytime Phone #: 941-748-6767

Typed or printed name of signing Managing Member/Manager