


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State DIVISION OF CORPORATIONS
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FILED

03 OCT 27 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400024179684
10/27/03--U1122--017 **150.00



1. DOCUMENT # L02000031922

Name and Mailing Address

0009954 01 AT 0.292 **AUTO T6 0 0615 33716-371101




GATEWAY PROPERTY GROUP, L.L.C.
10901 DANKA WAY NORTH
ST. PETERSBURG FL 33716-3711

2. New Mailing Address		4. State/Country of Formation FL	
City, State, Zip		5. Date Organized or Qualified To Do Business in Florida 11/27/2002	
Principal Place of Business 10901 DANKA WAY NORTH ST. PETERSBURG FL 33716	3. New Principal Place of Business Address	6. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
City, State, Zip		7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
MOORE, STEVEN W 8200 BRYAN DAIRY ROAD STE. 300 LARGO FL 33777		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

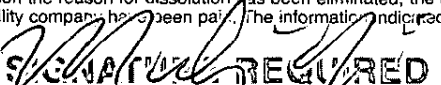
10. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent  REGISTERED AGENT MUST SIGN Date 10/22/03

11. Names and Street Addresses of Each Managing Member/Manager			
Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	MCLAIN, MARK	10901 DANKA WAY NORTH	ST. PETERSBURG FL 33716
MGR	PERMUY, MITCH	10901 DANKA WAY NORTH	ST. PETERSBURG FL 33716
MGR	DOWNES, RICHARD	10901 DANKA WAY NORTH	ST. PETERSBURG FL 33716

REINSTATEMENT 03
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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  REGISTERED AGENT MUST SIGN Date 10/23/03 Daytime Phone # (727) 544-0021 x201

Typed or printed name of signing Managing Member/Manager

CR2E084 (7/03)