PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 JUL 24 PM 2:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # L45133

1. Corporation Name

Tropical Properties of the Keys, Inc

2. Principal Office Address	3. Mailing Office Address
2600 Overseas Hwy	2600 Overseas Hwy
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Marathon FL	City & State: Marathon FL
Zip: 33050 Country: USA	Zip: 33050 Country: USA

REINSTATEMENT 99-00

4. Date Incorporated or Qualified To Do Business In Florida: 01/25/90

5. FEI Number: 65-0301818 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Devane, William N

Street Address (P.O. Box Number is Not Acceptable): 5701 Overseas Highway

Suite, Apt. #, Etc.: Suite 17

City: Marathon State: FL Zip Code: 33050

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8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 60[illegible].0505 or 617.0503, F.S.

Signature of Registered Agent: William N Devane
REGISTERED AGENT MUST SIGN

Date: 7/20/00

CR2E061 (9/99)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Hooper Kenneth R	2600 Overseas Hwy	Marathon FL 33050
VD	Roger, Edwards L	2600 Overseas Hwy	Marathon FL 33050
SD	Benninghove, Richard	2600 Overseas Hwy	Marathon FL 33050
TD	Morton IAN	2600 Overseas Hwy	Marathon FL 33050

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 60[illegible] 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 sect[illegible]n 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 secti[illegible]n 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: Richard A Benninghove Richard Benninghove 7/20/00 305-743-9071
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #