


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED  
02 DEC -9 PM 2:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>CORPORATION REINSTATEMENT</b>	 <b>FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS</b>
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DOCUMENT # **NO1000002025**

1. Corporation Name

SouthCenter/Commercial Owners Association, Inc.

2. Principal Office Address

225 E. Robinson Street

Suite, Apt. #, etc.

Suite 600

City & State

Orlando, Florida

Zip

32801

Country

USA

3. Mailing Office Address

225 E. Robinson Street

Suite, Apt. #, etc.

Suite 600

City & State

Orlando, Florida

Zip

32801

Country

USA

500003417455  
12/09/02--01051--002 \*\*236.25  
**REINSTATEMENT 02**

4. Date Incorporated or Qualified  
To Do Business in Florida

3/22/01

5. FEI Number

59-3706402

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

Steven R. Bechtel

Street Address (P.O. Box Number is Not Acceptable)

225 E. Robinson Street

Suite, Apt. #, Etc.

Suite 600

City

Orlando

State

FL

Zip Code

32801

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*Steven R. Bechtel*

Date

12/4/02

REGISTERED AGENT MUST SIGN

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
PTD	Selby W. Sullivan	46-505 E. Eldorado Drive	Indian Wells, CA 92210
VPD	Mary Barley	P.O. Box 1915	Islamorada, FL 33036-1915
VPD	Douglas H. Miller	500 Winderley Place,	Maitland, FL 32751
D	Steven R. Bechtel	225 E. Robinson Street Suite 600	Orlando, FL 32801

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 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:

*Steven R. Bechtel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/4/02

Date

407/425-9044

Daytime Phone #

CR2E081 (9/01)

12/10