FROM : I&J PROP MGMT
AUG.10.2006 11:03AM
FAX NO. :7279347000
Aug. 11 2006 02:20PM P2
NO.063 P.2/2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 AUG 11 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000001052

1. Corporation Name
NATURE'S PLACE OF HERITAGE SPRINGS
C/O I+J PROPERTY MGMT INC.

REINSTATEMENT 06

2006

CR2E081 (12/05)

OK Per Pat Bailey

2. Principal Office Address	3. Mailing Office Address
40347 US 19 North	P.O. Box 695
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Suite 201	
City & State	City & State
Tarpon Springs FL.	Tarpon Springs FL
Zip / Country	Zip / Country
34689 / Pinellas	34688-0695 / Pinellas

4. Date Incorporated or Qualified To Do Business In Florida

5. FEI Number
33-1004916

Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name
I+J Property Management INC

Street Address (P.O. Box Number is Not Acceptable)
40347 U.S. 19 North

100078386435
08/22/06--01019--017 **61.25

Suite, Apt. #, Etc.
Suite 201

City
Tarpon Springs FL 34689

State: FL Zip Code: 34689

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0303, F.S.

Signature of Registered Agent: Irene Karaguni
REGISTERED AGENT MUST SIGN

Date 7/12/06

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
P	Dominic Scola	1509 Westerham Loop	Trinity FL 34655
T	George Lacey	11802 Washburn Pl.	Trinity FL 34655
D	Howard Webster	11734 Washburn Pl.	Trinity FL 34655
D	Lynne Simmons	11824 Washburn Pl.	Trinity FL. 34655
D	Karen Campbell	11816 Washburn Pl.	Trinity FL. 34655

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 contained in Chapter 119, 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: ~~Tarpon Springs~~ [signature] 7/12/06 727 942 4755
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

George Lacey

I&J Property Management, Inc.

P.O. Box 695
Tarpon Springs, Florida 34688-0695
Telephone (727) 942-4755

July 18, 2006

Florida Department of State
Division of Corporations
P O Box 6327 Tallahassee FL 32314

Dear Ms Bailey:

We have received the certificate of administrative dissolution for Nature's Place Village Of Heritage Springs.

Please be advised that we have recently became the property management firm for this particular Association and were not aware that the previous management company (Citadel) failed to supply the appropriate documentation and payment for renewal.

Per telephone direction, enclosed is a check for the renewal fee. Please consider waiving the reinstatement fee.

Sincerely,

Ann Marie Finnegan
I & J Property Mgmt Inc

CC: Irene Karagianis
Nikki Christu

Ok Per Pat Bailey