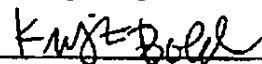


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SECRETARY OF STATE
DIVISION OF CORPORATIONS

CR28081 (11/10)

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N08000001503					
1. Corporation Name Savannah Park Master Association, Inc.					
2. Principal Office Address - No P.O. Box # 2901 Butterfield Road			3. Mailing Office Address 2901 Butterfield Road		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Oak Brook, Illinois			City & State Oak Brook, Illinois		
Zip 60523	Country	Zip 60523	Country	4. Date Incorporated or Qualified To Do Business in Florida 02/13/2008	
				5. FRN Number 26-2263045	Applied For Not Applicable
				6. CERTIFICATE OF STATUS DESIRED \$0.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name CT Corporation System					
Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road					
Suite, Apt. #, etc.					
City Plantation			State FL	Zip Code 33324	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.0603, F.S.					
Signature of Registered Agent				Kristin Bolden Assistant Secretary Date 8/24/2015	
REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
D	Residential Director, Charles Rand	5371 Factors Walk Drive		Sanford, Florida 32771	
D	Residential Director, James Beman	821 Belles Ferry Loop		Sanford, Florida 32771	
D	Commercial Director, John DiGiovanni	1175 Peachtree St. NE 100 Colony Square		#840	Atlanta, Georgia 30361
D	Commercial Director, Jason Macklin	2901 Butterfield Road		Oak Brook, Illinois 60523	
REINSTATEMENT					
AUG 24 2015 R. HUNT					
10. E-mail Address: newell@inlandgroup.com					
[To be used for future annual report notification]					
11. 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., and that all taxes owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.617.165, F.S.					
SIGNATURE:		John DiGiovanni, Commercial Director			
		8/28/15		(404) 229-7271	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**CORPORATION REINSTATEMENT
SAVANNAH PARK MASTER ASSOCIATION, INC.**

Certificate of Status	1
Certified Copy	0
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R. HUNT

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