PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**

**FLORIDA DEPARTMENT OF STATE**
Secretary of State
DIVISION OF CORPORATIONS

FILED
2008 SEP -8 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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09/10/08--01008--005 **122.50

CR2E081 (12/07)

DOCUMENT # N08212

1. Corporation Name
TIMBERLINE VILLAGE I OF CROSS CREEK CONDOMINIUM ASSOCIATION INC

| 2. Principal Office Address - No P.O. Box # | 3. Mailing Office Address |
|---|---|
| 13611 McGREGOR BLVD | 13611 McGREGOR BLVD |
| Suite, Apt. #, etc.: SUITE 6 | Suite, Apt. #, etc.: SUITE #6 |
| City & State: FORT MYERS, FL | City & State: FORT MYERS, FL |
| Zip: 33919 Country: USA | Zip: 33919 Country: USA |

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number: 592571984 ☐ 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: APEX MANAGEMENT SERVICES
Street Address (P.O. Box Number Is Not Acceptable): 13611 McGREGOR BLVD.
Suite, Apt. #, Etc.: SUITE 6
City: FORT MYERS State: FL Zip Code: 33919

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

REINSTATEMENT 07-08

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: Paul A Hannon Apex — Date: 8-28-08
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 |
|---|---|---|---|
| PD | SHARON DeLA MATER | 13090 WHITE MARSH LN #200 | FORT MYERS FL 33912 |
| VD | JUDIE MILLER | 13090 WHITE MARSH LN #207 | FORT MYERS, FL 33912 |
| TD | FAY HUBBARD | 13080 WHITE MARSH LN #100 | FORT MYERS, FL 33912 |
| SD | MYRNA HASLETT | 13080 WHITE MARSH LN #207 | FORT MYERS, FL 33912 |
| D | DONALD CORY | 13070 WHITE MARSH LN #103 | FORT MYERS FL 33912 |
| | | | |

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: Fay Hubbard / FAY HUBBARD 9/2/08 239-437-8400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #