

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

98 NOV 30 AM 9:23

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **N12104**
 1. Corporation Name
 DOWNTOWN WEST ASSOCIATION, INC.

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 -12/07/98--01149--012
 *****61.25 *****61.25

Principal Place of Business Mailing Address
 If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 400 North Tampa Street Suite, Apt. #, etc. Suite 2300 Attn: Gordon J. Schiff City & State Tampa, Florida Zip 33602	Country USA	3. New Mailing Office Address, If Applicable 400 North Tampa Street Suite, Apt. #, etc. Suite 2300 Attn: Gordon J. Schiff City & State Tampa, Florida Zip 33602	Country USA	4. Date Incorporated or Qualified To Do Business in Florida 11-14-85	5. FEI Number 59-2771341	Applied For Not Applicable
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status		

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D,S,V	Sam Agliano	3612 Mullen Avenue	Tampa, FL 33609
D,P	Reid Ashe	202 S. Parker Street	Tampa, FL 33606
D,T	John J. Avlon	200 Meeting Street, Ste 405	Charleston, SC 29401-2238
D	Charles W. Pittman	400 North Tampa St. Ste. 1040	Tampa, FL 33602
D,V	William L. Stoeltzing	420 W. Kennedy Blvd.	Tampa, FL 33606
D	Ronald Vaughn	401 W. Kennedy Blvd.	Tampa, FL 33606

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
	Name Gordon J. Schiff Street Address (P.O. Box Number is Not Acceptable) 400 North Tampa Street Suite, Apt. #, Etc. Suite 2300 City Tampa State FL Zip Code 33602

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.
 Signature of Registered Agent Gordon J. Schiff REGISTERED AGENT MUST SIGN Date 11/18/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)

12. 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: [Signature] 11/20/98 813-259-7781
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (1/98)