PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED FLORIDA DEPARTMENT OF STATE CORPORATION 08 JUL -7 AM 10: 59 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA DOCUMENT # N12583 1. Corporation Name The Gallery On Glen Condominium Association Inc. 600130260616 05/27/08--01005--015 **253.75 2. Principal Office Address - No P.O. Box # 3. Mailing Office Address 607-609 S. Glen Ave. 609 S. Glen Ave. CR2E081 (12/07) Suite, Apt. #, etc. Suite, Apt. #, etc. Date Incorporated or Qualified : 12/17/1985 To Do Business in Florida City & State City & State 5. EELNumber ---Tampa, Fl. Tampa, Fl. 59-2728400 Not Applicable Zip Country Zip Country \$8.75 Additional Fee required for a Certificate of Status CERTIFICATE OF STATUS DESIRED 33609 33609 USA USA 7. Name and Address of Current Registered Agent √ 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. City State Zip Code 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 Date 05/17/08 Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Titles City / State / Zip Р Jamie Kehm 609C S. Glen Ave. Tampa, Fl. 33609 VΡ John Coup 607F S. Glen Ave. Tampa, Fl. 33609 Sec. Jay Malaquias 609F S. Glen Ave. Tampa, Fl. 33609 Tres. Ildiko Hutchinson 607C S. Glen Ave. Tampa, Fl. 33609 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

05/17/08

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: