PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**

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

FILED
01 FEB 21 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N40497

1. Corporation Name
Mead Garden Preservation Association, Inc

| 2. Principal Office Address | 3. Mailing Office Address |
|---|---|
| 401 Park Ave. South | 401 Park Ave. South |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: Winter Park, Fl. | City & State: Winter Park, Fl. |
| Zip: 32789 Country: USA | Zip: 32789 Country: USA |

**REINSTATEMENT** 01

4. Date Incorporated or Qualified To Do Business in Florida: 22 Oct. 1990

5. FEI Number: 59-3080403 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional fee required for a Certificate of Status

SP

7. Name and Address of Current Registered Agent

Name: Karl Lotspeich

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-02/26/01--01002--001
****297.50 ****297.50

Street Address (P.O. Box Number is Not Acceptable): 2711 W. Fairbanks Ave

Suite, Apt. #, Etc.:

City: Winter Park | State: FL | Zip Code: 32789

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: Karl Lotspeich
REGISTERED AGENT MUST SIGN

Date: 2/20/01

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/D | Karl Lotspeich | 2711 W. Fairbanks Ave | Winter Park, Fl. 32789 |
| V/D | Lindsey Hayes | 734 Maryland Ave | Winter Park, Fl. 32789 |
| T | Brian Millard | 1584 Cavendish Rd. | Winter Park, Fl. 32789 |
| D | Gina Radcliff | 205 King Street West | Orlando, Fl. 32804 |
| D | Ann Pascoe | 113 E Lyman Ave #4 | Winter Park, Fl. 32789 |
| D | Craig Minegar | 111 N. Orange Avenue, 20th | Orlando, Florida 32801 |

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 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: Karl Lotspeich
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 2/20/01

Daytime Phone #: 407-740-8482