

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED AND FILED

APPLICATION FOR REINSTATEMENT



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

97 JUL 18 PM 12:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N45903

1. Corporation Name

Central Park Village Resident Management Corporations.

Principal Place of Business

Mailing Address

1318 Governor Street
Tampa, Fl. 33602

1000 India Street
Tampa, Fl. 33602

700002244347--0
-07/22/97--01124--001
****490.00 ****490.00

REINSTATEMENT 93-97

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

1991

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State N/A

City & State N/A

5. FEI Number 59-3095449

Applied For

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

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
(p) Pres.	Shelia Reed Palmore	1603 East Idell St. P.O. Box 172693	Tampa, Fl. 33604 Tampa, Fl. 33677
(p) V. Pres.	Annie Bell Williams	1023 Harrison Street	Tampa, Fl. 33602
Sec.	Josephine Barton	1122 Nebraska Avenue	Tampa, Fl. 33602
Cha	Foster Smith	1410 Armwood Court Apt B	Tampa, Fl. 33602
(p) Tre	Wendy Walker	1605 East Idell St P.O. Box 172141	Tampa, Fl. 33604 Tampa, Fl. 33677
Adv	Essie Mae Reed	1413 Armwood Court Ap.	Tampa, Fl. 33602

8. Name and Address of Current Registered Agent

ATTN: Ricky Gilmore
101 E. Kennedy Blvd
Suite 3200
Tampa, Fl. 33602

9. Name and Address of New Registered Agent

Name GABRIEL PANEPINTO
Street Address (P.O. Box Number is Not Acceptable)
3901 APPLE TREE DR
Suite, Apt. #, Etc.
City VALRICO State FL Zip Code 33594

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 605, F.S.

Signature of Registered Agent

Gabriel Panepinto

REGISTERED AGENT MUST SIGN

Date

5/13/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. 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: President Shelia Reed Palmore
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President Shelia R. Palmore

Date

Daytime Phone #

253-0551 ext 290

6-50-97

CR2E040 (2/96)