1 of 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION ~~REINSTATEMENT~~ **2002 UBR**

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

FILED
02 DEC 26 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2002 UBR
500009045375
11/18/02 01038 002 $61.25

DOCUMENT # N97000006551

1. Corporation Name

SHANGRI LA MOBILE HOME TENNANT ASSOCIATION, INC.

2. Principal Office Address	**3.** Mailing Office Address
1310 Fleming Av. Lot 69C	same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ormond Bch, Fl. 32174	City & State: Same
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 11/17/1997

5. FEI Number: Not-Applicable — 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: RONALDO A. CALLIER

Street Address (P.O. Box Number is Not Acceptable): 1310 Fleming Ave.

Suite, Apt. #, Etc.: C69

City: Ormond Beach, State: FL Zip Code: 32174

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: Ronaldo A. Caillier — Date: 12-28-02

REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

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
R/A/D	RONALDO A. CALLIER	1310 Fleming Av. C69	Ormond Bch, Fl. 32174
B/D	JACK GODFREY	" " " C74	" " " "
B/D	Ronald Mills	" " " D88	" " " "
B/D	HAROLD HAYES	" " " B33	" " " "
B/D	ANDY COURTER	" " " C68	" " " "

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: Ronaldo A. Caillier — 12-28-02 — 677-8189

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2 of 3

AFTER TALKING TO BARBARA ABOUT THE PROBLEMS OF NOT RECIEVING THE DUE NOTICE FOR OUR CORP. PAPERS IN THE PAST YEARS AND RECIEVING THE CANCELATIONS AND THE SURCHARGE OF $175.00. AND NEITHER ONE OF US COULD COME UP WITH AN ANSWER.

YOU SUGGESTED THAT THE $61.25 SHOULD BE SENT IN AND THAT THE NOTICE WOULD BE SENT IN FROM JAN. TO JAN. THANKS FOR YOUR VERY SPECIAL HELP.

THE NOTICES SHOULD BE SENT TO HAROLD HAYES
1310 FLEMING AVE
LOT B 33.
ORMOND BEACH
FLORIDA
32174

December 30, 2002

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314
Attn: Kathy Ashton, Specialist
Ref: Letter # 602A00063910

Re: Shangri La Mobile Home Tennant Association, Inc.
Ref. # N97000006551

Dear Kathy:

Enclosed please find a copy of the corrected form you requested. Please review and reconsider waiving the reinstatement fee due to the mix up of us not receiving the notice for yearly filing.

I appreciate any help you can give us.

Yours truly,

Ronaldo A. Callier
Registered Agent
1310 Fleming Av. C69
Ormond Beach, Fl. 32174