PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 APR -1 PM 2:37

CORPORATION REINSTATEMENT

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

DOCUMENT # N98000002886

1. Corporation Name

Bloomingdale-BL Homeowners' Association, Inc.

REINSTATEMENT 01-02

2. Principal Office Address	3. Mailing Office Address
776 W. Lumsden Rd.	Same
Suite, Apt. #, etc. Suite 107	Suite, Apt. #, etc.
City & State Brandon, FL	City & State
Zip 33511 Country Hillsborough	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: May 18, 1998

5. FEI Number: 59-3596345 ☐ 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

700005283977--3
04/17/02--01068--008
****297.50 ****297.50

Name: Harvey Tucker

Street Address (P.O. Box Number is Not Acceptable): 776 W. Lumsden Road

Suite, Apt. #, Etc.: Suite 107

City: Brandon State: FL Zip Code: 33511

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: Harvey Tucker Date: 3/29/02

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
PD	Harvey Tucker	776 W. Lumsden #107	Brandon, FL 33511
VD	Tom Thurman	776 W. Lumsden #107	Brandon, FL 33511
STD	Harold Stafford	776 W. Lumsden #107	Brandon, FL 33511

JBu/12

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: Harvey Tucker 3/29/02

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