

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 NOV 29 PM 12:52

DOCUMENT #

1. Corporation Name

p00000078402

AFFORDABLE DEVELOPMENT GROUP, INC.

700043300427
12/09/04--01026--013 **8.75

REINSTATEMENT 03-04

2. Principal Office Address

928 Sycamore Street

Suite, Apt. #, etc.

3. Mailing Office Address

928 Sycamore Street

Suite, Apt. #, etc.

City & State

Daytona Beach, FL.

Zip

32114

Country
USA

City & State

Daytona Beach, FL.

Zip

32114

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/14/2000

5. FEI Number

59-3116205

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

Thomas A. Huger

Street Address (P.O. Box Number is Not Acceptable)

928 Sycamore Street

Suite, Apt. #, Etc.

100043300481

12/09/04--01026--014 **901.00

City

Daytona Beach

State

FL

Zip Code

32114

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

REGISTERED AGENT MUST SIGN

Date 26 Nov 04

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	Linda G. Huger	928 Sycamore Street	D. B., FL 32114
VP	Thomas A. Huger	928 Sycamore Street	D. B., FL. 32114
VP	Sophia R. Huger	928 Sycamore Street	D. B., FL. 32114
VP	Thomas A. Huger, III	928 Sycamore Street	D. B., FL. 32114
VP	Marié L. Huger	928 Sycamore Street	D. B., FL. 32114

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS A. HUGER

26 Nov 04

Date

386-527-2313

Daytime Phone #

CR2E081 (9/01)