## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

THE DO									1							
CORPORATION (				FLORIDA DEPARTMENT OF STATE Secretary of State					FILED							
REINSTATEMENT				Sh.	DIVISION OF CORPORATIONS					03 MAY -9 PM 2:55						
DOCUMENT # P00000104085  1. Corporation Name									SECTION OF STATE							
Con	do Inves	stors (	of Pan	ama	City Be	each, In	C.			g*****.	arre arrest					
										04/1	8/03	162 01017-	ゴンU -014	**300	00.00	
2. Principal Office Address					3. Mailing Office Address 460 Harrison Avenue											
10801 Hwy 231					Suite, Apt. #, etc.											
Suite, Apt. #, etc.					Cono, rip.: #; ott.					4. Date inco	rporated or siness in Fl				_	
City & State					City & State					5. FEI Num		unua //	-6-		lied For	
Panan <sup>Zip</sup>	Panama City, FI.				Panama City, I			Country				392255		<del></del>	Applicable	_
32466	· =		Bay	يسه حالت	32401		_	Bay		6. CERTIFICA	TE OF STATI	JS DESIRED	\$8.75 A	Additional Certificate	Fee required of Status	
					7	'. Name an	d Addres	s of Current	Registero	ed Agent						•
	Name Ju	idy F	oister				_				****					
	Street Add	ess (P.O	. Box Num	ber is No	t Acceptabl	<sup>le)</sup> 1080	1 Hwy	y 231		05 <b>/</b> 0	19/03	-01057-	ゴンリ -005	**238	. 25	
-	Suite, Apt.	#, Etc.	•		·					\ <u>-</u>						
	<sup>City</sup> Par	nama	City			<u> </u>					State FL	Zip Code 32460	_			_ ^
8. I, being a	appointed the	registere	ed agent of	the atooy	e named co	orporation, a	m familiar	with and acc	ept the ob	ligations of sec	tion 607.05	05 or 617.05	03, F.S.			CR2E081 (10/02
Signature of Registered A		γU	ly		OLS.	AGENT MIL	IST SIGN	· · ·			Date	4/14/0	)2			CRZED
9. Names	and Street Ad	dresses	of Each O	ficer and	or Director	(Florida non	profit con	orations mus	st list at lea	st 3 directors)			-11			l
Titles	Name of Officers and/or Directors						Street Address of Each Officer and/or Director					С	ity / State /	Zip		
D	Judy Fositer					P.O.	P.O. Box 1610				Pana	Panama City, Fl. 32402-1610				
	_															
			10.1									·	<del></del>			ĺ
		·	<u> </u>		-1-,-									-	*	
		<b></b>									-			···-		l
	····-							<u></u>								
																ĺ
										rovided for in c the requiremen						ĺ
owed by		ion have	been paid	and the n	ames of inc	lividuals liste	d on this	form do not q	ualify for a	ın exemption u						
	-	$\bigcap$	,, 1		In:	An	•		<b>/</b>		4/4 4/0		EO 705	2440		
SIGNAT	TURE:		AND TYPE	OR PRI	TED NAME	OF SIGNING	DFFICER (	JUDY OR DIRECTOR	tois,	Er	4/14/0: Date	5 8	50-785 Daytime	Phone #	<u></u>	

g1 5119

## CONDO INVESTORS OF PANAMA CITY BEACH, INC. 460 HARRISON AVENUE PANAMA CITY, FL. 32401

April 15, 2003

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

> Re: Corporation Reinstatement Document #P00000104085

To Whom It May Concern:

I respectfully request that the above corporation be reinstated. Our office deals with approximately thirty-five separate corporations and did not realize until just recently that this one had been dissolved. Upon reviewing our files we discovered the UBR renewals were being mailed to an address other than our office. I have made the correction on the enclosed form so as to avoid this occurring next year. I have enclosed a check for the amount given to me by a representative in your office.

Your assistance in helping to get this corporation reinstated would be greatly appreciated. If you have further questions I can be reached at 850-785-2449.

MIDIK.

Judy Foister

A respectively roop as that the company of the production of conflict faces with a grantification of the first three sop were company of the conflict of real or of figure recently that our had been disserted. Then review by the our files we then the bull self and earliest or the earliest figure out the earliest form to address after the out of the conflict or there are a first one woods of any out of the conflict of the confli

Grand the second of the second