

OCT-29-2002 14:20

CROWN MARKETING GROUP

P. 03/05

**APPLICATION FOR REINSTATEMENT**  
**FLORIDA DEPARTMENT OF STATE**  
**Jim Smith**  
**Secretary of State**  
**DIVISION OF CORPORATIONS**

FILED

DOCUMENT # P01000110551

02 NOV 25 PM 3:24

1. Corporation Name

THREE RIVERS HOMES, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

1808 SPANISH OAK CT.  
CLEARWATER FL 33761

Mailing Address

2806 SPANISH OAK CT.  
CLEARWATER FL 33761

If above addresses are incorrect in any way, list 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	
State, Apt. #, etc.		State, Apt. #, etc.		11/10/2001	
City & State		City & State		5. FID Number	
Zip		Country		Applied For	
				Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>					

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

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	John P. Stechhausberg	2806 Spanish Oak Ct.	Clearwater FL 33761
V.P.	William C. Burke	5115 W. Platt St.	TAMPA FL 33609
Treasurer	Curtis Lefew	13940 Fletcher Mill Dr	TAMPA FL 33613
Secretary	Stephanie Lefew	13940 Fletcher Mill Dr	TAMPA FL 33613

8. Name and Address of Current Registered Agent

JANEZ, JOSEPH  
4015 E BUNCH BLVD. SUITE 113  
TAMPA FL 33617

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Applicable)
State, Apt. #, etc.
City
Zip Code

10. I, being appointed the registered agent of the above named corporation, am hereby with me accept the conditions of Chapter 607, F.S. or 617, F.S.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date

10-15-02

11. I certify that I am an officer or director or the equivalent of stated 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 corporation has satisfied the requirements of section 607.0401 or 617.0401, F.S., that all taxes owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 110.6700(1), 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 PRESS ON PROPER PLACES OF SECRETARY OF STATE OFFICE OR DIRECTOR

Date

Daytime Phone #

10/29/02

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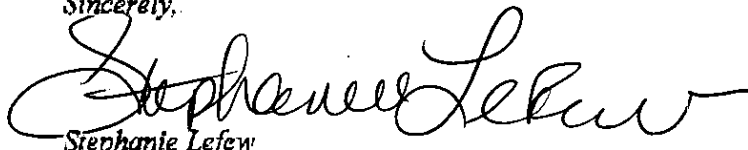
*Three Rivers Homes, Inc.  
2806 Spanish Oaks Ct.  
Clearwater, FL 33761*

*October 29, 2002*

*Dear Revenue Agent*

*Please file this form, as on time. We sent a letter in August with our \$150.00 fee however we never received a response and we received a notice that the corporation was dissolved. However upon calling Tallahassee to see what happened, the agent said the check was received and cashed however, the form needed a signature for the registered agent. This letter was sent in September but never received. We are sending this report with the signature now and the \$150.00 fee has already been received. Please waive any additional penalties. Thank you for your time.*

*Sincerely,*

  
Stephanie Lefew  
Treasurer Secretary