

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 AUG 25 PM 3:56

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P02000002930

**1. Corporation Name**

Sunburst Properties, Inc.  
21 W. High Point Road  
Stuart, Florida, 24996

**2. Principal Office Address**

21 W. High Point Road

**3. Mailing Office Address**

Stuart, Florida, 24996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Stuart, Florida

City & State

Stuart, Florida

Zip

34996

Country

USA

Zip

34996

Country

USA

**4. Date Incorporated or Qualified**

To Do Business in Florida January 9, 2002

**5. FEI Number**

72-1520794

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

Marion D. Lamb, III

300040845513

09/08/04--01022--002 \*\*\$8.75

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

300040845513

09/08/04--01022--001 \*\*\$300.00

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32303

**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

*[Signature]*

Date 8-25-04

REGISTERED AGENT MUST SIGN

**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
Pres	J. Stanley Walker	21 W. High Point Road	Stuart, Florida, 34996
Sec/Tre	J. Stanley Walker	21 W. High Point Road	Stuart, Florida, 34996
V.Pres	Robert L. Bishop	768 Travelers Blvd., Suite 101	Summerville, SC 29485
Asst. S	Robert L. Bishop	768 Travelers Blvd., Suite 101	Summerville, SC 29485

**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:

*Robert L. Bishop VP*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-24-2004 843-832-4378

Date

Daytime Phone #

CP2E081 (01/04)

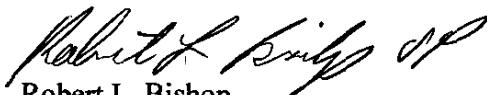


## SUNBURST PROPERTIES, INC

Date: August 24, 2004  
To: Department of State  
From: Robert L. Bishop  
Re: Waiver of Fees

Sunburst Properties, Inc. is asking that Reinstatement fee of \$600.00 be waived as we never received  
a notice. Thank you so much. 2003

Sincerely,



Robert L. Bishop  
Vice President