

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 SEP 13 AM 8:00

DOCUMENT # **102000013783**

1. Corporation Name

FLORIDA GOLD PROPERTY MANAGEMENT INC

REINSTATEMENT 03-04

2. Principal Office Address

PO BOX 470096

Suite, Apt. #, etc.

City & State

CELEBRATION, FL

Zip

34746

Country

USA

3. Mailing Office Address

PO BOX 470096

Suite, Apt. #, etc.

City & State

CELEBRATION, FL

Zip

34746

Country

USA

100039868811
08/04/04--01048--010 **758.75

4. Date Incorporated or Qualified
To Do Business in Florida

24TH JANUARY, 2002

5. FEI Number

900002542

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

LESLEY O'NEAL

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

947, LAKE BERKLEY DRIVE

Suite, Apt. #, Etc.

City

KISSIMMEE

State

FL

Zip Code

34746

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

Lesley O'Neal

REGISTERED AGENT MUST SIGN

Date **30 JULY 2004**

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	JOHN C. MUNN	409, ARBOR CIRCLE	CELEBRATION, FL 34747
V	RICHARD A. O'NEAL	947, LAKE BERKLEY DR.	KISSIMMEE, FL 34746
S	LESLEY A. O'NEAL	947, LAKE BERKLEY DR.	KISSIMMEE, FL 34746

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:

Lesley O'Neal - **LESLEY O'NEAL**

30 JULY 2004

Date

Daytime Phone #

321-989-0913