

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

05 MAY 23 PM 12:31

DOCUMENT # P93000037149

1. Corporation Name

SUNNYSIDE LAND MANAGEMENT, INC.

900055574019
06/01/05--01036--009 **1950.00

REINSTATEMENT

970.5

2. Principal Office Address

3611 LAKE DRAWDY DRIVE

Suite, Apt. #, etc.

City & State

ORLANDO, FL

Zip

32820

Country

US

3. Mailing Office Address

3611 LAKE DRAWDY DRIVE

Suite, Apt. #, etc.

City & State

ORLANDO, FL

Zip

32820

Country

US

**4. Date Incorporated or Qualified
To Do Business in Florida**

5/21/93

5. FEI Number

59-3244497

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

CRAIG A. MINEGAR, ESQ.

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

250 PARK AVENUE SOUTH

Suite, Apt. #, Etc.

5TH FLOOR

City

WINTER PARK

State

FL

Zip Code

32789

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

Mary R. Lamar
REGISTERED AGENT MUST SIGN

Date

5/18/05

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
PD	MARY RYBOLT LAMAR	3611 LAKE DRAWDY DRIVE	ORLANDO, FL 32820
VPTD	LAURIE LAMAR CAMACHO	1351 CROWN ISLE CIRCLE	APOPKA, FL 32712
SD	LESLIE LAMAR HARMESON	3611 LAKE DRAWDY DRIVE	ORLANDO, FL 32820

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:

Mary R. Lamar
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/18/05

Daytime Phone #

CR2E081 (01/05)