PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

05 OCT 31 PM 5:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000001059

1. Corporation Name

House By The Sea Investment, Inc.

REINSTATEMENT 13-05

CR2E081 (8/05)

2. Principal Office Address	3. Mailing Office address
1101 S. Belcher Rd.	1101 S. Belcher Rd.
Suite, Apt. #, etc. J	Suite, Apt. #, etc. J
City & State Largo, FL	City & State Largo, FL
Zip 33771 / Country USA	Zip 33771 / Country USA

4. Date Incorporated or Qualified To Do Business in Florida 01/04/1996

5. FEI Number 650751870 — Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: Walt Burgess

Street Address (P.O. Box Number is Not Acceptable): 1101 S. Belcher Rd.

Suite, Apt. #, Etc.: Suite J

City: Largo. State: FL Zip Code: 33771

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent: _____ Date: 10/26/2005

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Private nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Frank Schilte, Sr.	1101 S. Belcher Rd, #J	Largo, FL 33771

10/31

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10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in section 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.

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SIGNATURE: _____ Frank Schilte Sr. 10/26/2005 (727) 524-00[illegible]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #