PLEASE READ	ALL INSTRUCTIONS BEFORE	COMPLETING FORM
CORPORATION RELIEF TABLE MEN W	FLORIDA DEPARTMENT OF STATE  Jim Smith  Secretary of State  DIVISION OF CORPORATIONS	02 NOV 18 AM II: 26  SECTION Y OF STATE TALLAHASSEE, FLORIDA
DOCUMENT# P960000 12654  1. corporation Name Stone Creek Lodge inc  5102 Long Fellow and  Tompo, FC 33629		
2. Principal Office Address  5103 Long Sellow QUE  Suite, Apt. #, etc.	3. Mailing Office Address  SIDA Long Ellao Aug  Suite, Apt. #, etc.	30008755803 11/01/0201037020 **150.00
City & State  Tampa FL  Zip Country  Country	City & State  TOMO FL  Zip  Country  Country	To Do Business in Florida  To Do Business in Florida  Applied For Not Applicable  S8.75 Additional Fee required
7. Name and Address of Current Registered Agent  Name  Name  Name  Note: L. Cone  11/18/02-01/034-002 **150  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.  City		
8. I, being appointed the registered agent of the above Signature of Registered Agent	re named corporation, am familiar with and accept the obl	Pale 10/29 ha
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 SIDA Longellou		Sity / State / Zip  State / Zip  State / Zip
·		
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 filting 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Daytime Phone #		

## STONE CREEK LODGE, INC. 5102 Longfellow Avenue Tampa, FL 33629

Phone (813) 839-4442

Fax (813) 835-3261

October 29, 2002

Re-Instatement Division Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Corporate Reinstatement

Dear Sir/Madame,

Pursuant to my telephone conversation to your office yesterday, I was advised that I need to send in \$150.00 along with a fully executed corporate reinstatement form for the above referenced Corporation to be re-instated due to my not receiving the corporate reinstatement form.

Your office advised me that I need to state in writing that the previous form supplied by the Florida Department of State was sent to an attorneys office previously located at 201 North Franklin Street, Tampa, FL that is no longer in business and therefore causing the Corporation to lapse.

By copy of this letter along with my check, I believe I have fulfilled what was requested of me in yesterday's conversation. Any additional information that you may need, please contact me at the above number.

Sincerely,

Michael L. Cone

President





## FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

November 7, 2002

STONE CREEK LODGE, INC. 5102 LONGFELLOW AVE TAMPA, FL 33629

SUBJECT: STONE CREEK LODGE, INC.

Ref. Number: P96000012654

We have received your document for STONE CREEK LODGE, INC. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporation was administratively dissolved for failure to file the 2001 UBR. We will need to collect the UBR fee for both years 2001 and 2002. The total amount due to bring the corporation current, without penalty, is \$300.00.

There is a balance due of \$150.00.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner Senior Section Administrator

Letter Number: 802A00060857