		PLEASE READ	ALL INST	RUCTIONS	S REFORE (COMPLET	ING THIS FORM		
PLEASE READ ALL INSTRUCTIONS BEFORE C APPLICATION FOR FOR DIVISION OF CORPORATIONS						7			
DOCUMENT # P96000087582						97 NOV -6 MM 8: 59			
GOLD MEDALLION HOMES, INC.						SECRETARY OF STATE TALLAHASSEE FLORIDA			
21318 PRE	lace of Busin SERVATION D IKES FL 34639	RIVE	Mailing Address 21318 PRESERVATION DRIVE LAND O'LAKES FL 34639						
If above addresses are incorrect in any way, line through incorrect 2. New Principal Office Address, If Applicable 3. New Mai Suite, Apt. #, etc. Suite, Apt. #				ing Office Address, If		Date Incorporated or Qualified To Do Business In Florida 10/22/1996			
City & State			City & State			5. FEI Numbe	3408464	Applied For Not Applicable	
Zip Country Zip			Zip	Country			6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status		
7. Names and Street Addresses of Each Officer and/or Director (Fig. Name of Officers and/or Directors 2				Str Of	ations must list at lea reet Address of Each ficer and/or Director se Post Office Box I]	City / State / Zio		
D	KELLY, ELIZABETH J			21318 PRESERVATION DRIVE			LAND O'LAKES FL 34639		
D.*.	KELLY, ROBERT A JR			21318 PRESERVATION DRIVE			LAND O'LAKES FL 34639		
(71	0002345; -11/12/9701 	1107004	
Name and Address of Current Registered Agent						9. Name and	Address of New Registered A	gent	
DOWD, HENRY R 5141 EALGE ISLAND DRIVE LAND O'LAKES FL 34839					Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, Etc.				
Signature of Registered /	s corpo	ration owes or ha	BISTERED AGI	ration am familiar wi ENT MUST SIGN Current yea	ar 🗀	oligations of Secti	on 607.0505, F.S. Date 11/3/91 (See other side	Zip Code for Information 1	
12. I certify this reins owed by	that I am an o statement app the corporati	Hication, the reason for dissoli	er or trustee em	powered to execute eliminated, the corpo	rate name satisfies t	lhe requirements	on Intang pter 607 or 617, F.S. I further co of section 607.0401 or 617.040 ler section 119.07(3)(i), F.S. Th	ertify that when filing	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:

· 曹子を見れる者とは、東京の後、京南は丁子で、アンを「唐子を唐を大きせ、一般といれて、東丁を付けているとはる。

Daylime Phone #



GOLD MEDALLION HOMES, INC. 21318 PRESERVATION DRIVE LAND O' LAKES, FLA 34639

November 3, 1997

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS ANNUAL REPORT / REINSTATEMENT SECTION P.O. BOX 6327 TALLAHASSEE, FL 32314-6327

RE: GOLD MEDALLION HOMES, INC. DOCUMENT # P96000087582

Gentlemen,

Please find enclosed application for reinstatement along with our check in the amount of \$173.75. Our Corporation was incorporated on October 22, 1996. We never received an annual report for 1997, nor did we receive a second notice. The very first notice we received was the notice of revocation.

I am only guessing at why we never received either first or second notice. I assume that since we incorporated so late in the year in 1996, perhaps there was a problem in our 1997 annual report not being mailed out to us on time.

I understand that the Department of State will waive the \$585.00 reinstatement fee, this year only, for those individuals who never received their annual reports.

I have enclosed a check in the amount of \$173.75 as follows:

Annual Report Fee \$61.25
Corporate Supplemental Fee \$103.75
Certificate Of Status 8.75
Check Enclosed: \$173.75

Please file the enclosed reinstatement application along with our check for \$173.75, and provide us with a certificate of status as soon as possible. Thank you in advance for your help.

Sincerely, GOLD MEDALLION HOMES INC.

Robert A. Kelly Jr.

President