

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04

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03/16/04--01050--011 **308.75

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000040182 1. Corporation Name LEGACY HOMES & INVESTMENTS III, INC.			
2. Principal Office Address 965 N. NOB HILL ROAD Suite, Apt. #, etc. #124 City & State PLANTATION, FL Zip 33324 Country USA		3. Mailing Office Address 965 N. NOB HILL ROAD Suite, Apt. #, etc. #124 City & State PLANTATION, FL Zip 33324 Country USA	

4. Date Incorporated or Qualified To Do Business in Florida 05/06/97	
5. FEI Number 65-0754020	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name MARC CHANCELOR	
Street Address (P.O. Box Number is Not Acceptable) 965 N. NOB HILL ROAD	
Suite, Apt. #, Etc. #124	
City PLANTATION	State FL
Zip Code 33324	

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 _____ Date 2/18/04

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	City / State / Zip
D/P	ZINE HINNANT	965 N. NOB HILL ROAD #124	PLANTATION, FL 33324

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: Zine Hinnant Date 2/18/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E061 (01/04)

LEGACY HOMES & INVESTMENTS III, INC.
965 NORTH NOB HILL ROAD #124
PLANTATION, FLORIDA 33324
(954) 709-2625

Sent via Federal Express

February 24, 2004

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Reinstatement
Legacy Home & Investments III, Inc.
Document # P97000040182

Dear Sirs:

Please be advised that I did **not** receive my Annual Report Filing Form before and therefore the corporation was dissolved. I had been quite embedded in personal situations and didn't realize that this was the case.

I am sending this Corporation Reinstatement Form to you along with the reinstatement fees quoted to me when I called your office. The fees enclosed are \$150.00 for the year 2002 and \$150.00 for the year 2003. Once these are filed, I will then be able to download the Annual Report Form for 2004 and send it off as well.

Should there be any need to contact me, please do so @ (954) 709-2625. Your cooperation in this matter is greatly appreciated.

Sincerely,



Zine Hinnant
President