

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

00101

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

01 AUG 22 PM 3:01

DOCUMENT # P98000100717

1. Corporation Name

The Senior Group, Inc.

2. Principal Office Address

2785 S. Country Club Dr.

3. Mailing Office Address

2785 S. Country Club Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Avon Park, FL

City & State

Avon Park, FL

Zip

33825

Country

Highlands

Zip

33825

Country

Highlands

4. Date Incorporated or Qualified To Do Business in Florida

11/30/98

5. FEI Number

65-0876997

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

Christine Fitch

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

2785 S. Country Club Dr.

Suite, Apt. #, Etc.

City

Avon Park.

State

FL

Zip Code

33825

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

Christine Fitch
 REGISTERED AGENT MUST SIGN

Date

8/16/01

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

Type	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/S/D	Christine Fitch	2785 S. Country Club Dr.	Avon Park, FL 33825

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)(f), 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:

Christine Fitch

Christine Fitch
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

Date

8/16/01

863 382 2546

Daytime Phone #

THE SENIOR GROUP, INC.
2785 S. COUNTRY CLUB DR.
AVON PARK, FL 33825

(863) 382-2546

August 14, 2001

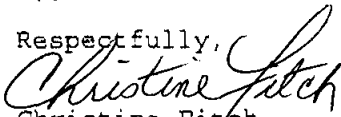
Florida Department of State
Katherine Harris
Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Gentlemen:

Enclosed please find a reinstatement form for our corporation. Because of our change of business address, we never received our annual reporting forms in order to stay current. I believe your records reflect the return of your mailings to us.

A check for \$300 is enclosed to cover the reinstatement fees applicable since we did not receive our mailings.

Respectfully,


Christine Fitch
President