

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

97 APR 11 PM 2:30

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # 768329

1. Corporation Name

Oak Meadow Condominium Association of Pensacola, Inc.

Principal Place of Business

Mailing Address

3298 Summit Blvd.
 Suite 4
 Pensacola, Fl. 32503

REINSTATEMENT *96-97*

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

4. Date Incorporated or Qualified To Do Business in Florida

05/09/1983

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

59-2296537

Not Applicable

City & State

City & State

Zip

Country

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 (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Dir. Pres.	George Moore	7225 W. Fairfield Dr. F-6 Pensacola, FL 32506	Pensacola, FL 32506
Dir. SEC.	Patsy Burris	7225 W. FAIRFIELD DR. F-2	Pensacola, FL, 32506
V. PRES. Dir.	Jon Deloge	7225 W. Fairfield Dr. D-8	Pensacola, FL. 32506
Dir. SEC.	FRAN BUECHLER	7225 W. FAIRFIELD DR B8	PENSACOLA, FL 32506
Dir.	CHERYL REEVES	858 VALLEY RIDGE DR	PENSACOLA, FL32514

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RAY O. ETHERIDGE
 3298 SUMMIT BLVD Suite 4
 PENSACOLA, FL. 32503

Name

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

Suite, Apt. #, Etc.

City

400002142504--2

-04/14/97--01148--005

***297.50 zip code ***297.50

FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Ray O Etheridge

REGISTERED AGENT MUST SIGN

Date

4/4/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No

(See other side for information on intangible tax.)

12. 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:

George Moore George Moore

Date

Daytime Phone #

4/4/97 (904)434-3585

CR-2040 (12/96)