

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.


FILED

02-NOV 27 AM 11:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000009054300
11/18/02--01097--008 **\$1.25

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N01000002794**

1. Corporation Name
OAK HILL MOBILE HOME PARK HOME OWNER'S ASSOCIATION, INCORPORATED

2. Principal Office Address
1331 OAKHILL ST
Suite, Apt. #, etc.
LOT 75
City & State
LAKELAND, FL
Zip
33815 Country
USA

3. Mailing Office Address
Suite, Apt. #, etc.
City & State
Zip Country

4. Date Incorporated or Qualified To Do Business in Florida
APRIL 2001

5. FEI Number
58-1596884
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
CAROL EVANS

Street Address (P.O. Box Number is Not Acceptable)
1331 OAKHILL ST.

Suite, Apt. #, Etc.
LOT 70

City
LAKELAND State
FL Zip Code
33815

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 *Carol Evans* Date **11/14/02**
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 |
|--------|-----------------------------------|--|--------------------|
| PT | JAMES P. McNULTY | 1331 OAKHILL ST | LAKELAND, FL 33815 |
| VT | CAROL FAIRCHILD | 1331 OAKHILL ST | LAKELAND, FL 33815 |
| STT | CAROL EVANS | 1331 OAKHILL ST | LAKELAND, FL 33815 |
| | | | |
| | | | |

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: *Carol Evans* **CAROL EVANS** Date **11/14/02** Daytime Phone # **863-602-0967**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (9/01)

Handwritten notes and signatures at the bottom of the page.

11-14-02

TO WHOM IT CONCERNS:

MAILED IN ANNUAL REPORT BUT GOT NO
REPLY, WAS ADVISED TO MAIL IN THIS REINSTATEMENT
FORM WITH \$61.25 AND REQUEST THE LATE
FEE, IF ANY, BE WAIVED.

THANK YOU,

CAROL EVANS (ST)

1331 OAKHILL

LOT 70

LAKELAND, FL 33815

863-602-0967

OAKHILL MOBILE HOME PARK
HOMEOWNERS ASSOCIATION,
INC.

Carol J Evans