

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 MAR 29 AM 8:00

DOCUMENT # NO2000009208

1. Corporation Name

500 EAST BUILDING ASSOCIATION, INC.

2. Principal Office Address

500 E. University Avenue

Suite, Apt. #, etc.

Suite A

City & State

Gainesville, FL

Zip

32601

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

4. Date Incorporated or Qualified  
To Do Business in Florida

11/25/02

5. FEI Number

48-1290206

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**REINSTATEMENT** 03-04

**7. Name and Address of Current Registered Agent**

Name

Anthony J. Salzman

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

500 E. University Avenue

Suite, Apt. #, Etc.

Suite A

City

Gainesville

State  
**FL**

Zip Code

32601

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

*Anthony J. Salzman*

REGISTERED AGENT MUST SIGN

Date 3/25/04

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
DP	C. Gary Moody	500 E. Univ. Ave., Ste. A	Gainesville, FL 32601
DV	Anthony J. Salzman	500 E. Univ. Ave., Ste. A	Gainesville, FL 32601
DST	Shelley S. Salzman	500 E. Univ. Ave., Ste. A	Gainesville, FL 32601

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:

*C. Gary Moody*

C. Gary Moody

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/04 (352) 373-6791

Date

Daytime Phone #

CR2ED01 (01/04)