

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

**CORPORATION
REINSTATEMENT**



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

02 AUG 14 PM 12:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N35849

1. Corporation Name

Oak Hill Plantation Property Owner's Association

300007169583--4
-08/16/02--01056--003
*****665.00 *****665.00

REINSTATEMENT 95-02

2. Principal Office Address

106 Hatley Street Southeast

Suite, Apt. #, etc.

N/A

City & State

Jasper, Florida

Zip

32052

Country

USA

3. Mailing Office Address

P. O. Box 191

Suite, Apt. #, etc.

N/A

City & State

Jasper, Florida

Zip

32052

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

12/21/1989

5. FEI Number

59305481

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

Ronald H. Ratliff

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

14859 Southeast County Road 137

Suite, Apt. #, Etc.

Not Applicable

City

Jasper

State

FL

Zip Code

32052

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

REGISTERED AGENT MUST SIGN

Date 08/12/2002

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 |
|--------|-----------------------------------|-----------------------------------------------------|--------------------|
| P/D | Ronald H. Ratliff | P. O. Box 191 | Jasper, FL 32052 |
| VP/D | James M. Moody | P. O. Box 191 | Jasper, FL 32052 |
| S/D | Vickie L. Ratliff | 14859 S.E. County Road 137 XXXXXXXXXX | Jasper, FL 32052 |
| | | | |
| | | | |

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:

(Ronald H. Ratliff)

08/12/02

386-792-8484

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/01)

7/8/14/02