

Nov-16-98 11:57A

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

98 DEC -2 PM 3:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000039720

1. Corporation Name

OAK CREEK CAPITAL, INC.

Principal Place of Business

150 SECOND STREET NORTH STE 860
ST PETERSBURG FL 33701-3327

Mailing Address

150 SECOND STREET NORTH STE 860
ST PETERSBURG FL 33701-3327

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT 98

4. Date Incorporated or Qualified
To Do Business in Florida

05/03/1996

5. FEI Number

59-3381506

Applied For

Not Applicable

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
P	SMITH, DAVID J	150 SECOND ST NORTH STE 860	ST PETERSBURG FL
P & D	Pace, Richard	150 Second St. North, Ste.860	St. Petersburg, FL 33701
S,T,D	Krueger, Kyle	150 Second St. North, Ste.860	St. Petersburg, FL 33701

900002705339--7
-12/07/98--01165--003
****750.00 ****750.00

8. Name and Address of Current Registered Agent

KOEGLER, STEVEN C
1051 DEERWOOD PARK BLVD BLDG 100 STE 200
JACKSONVILLE FL 32256

9. Name and Address of New Registered Agent

Name
A. R. Neal, Forlizzo & Neal, P.A.
Street Address (P.O. Box Number is Not Acceptable)
13577 Feather Sound Drive
Suite, Apt. #, Etc.
Suite 300
City
Clearwater
State
FL
Zip Code
33762

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

A. R. Neal

REGISTERED AGENT MUST SIGN

Date 11/18/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard Pace

Date

Daytime Phone #

11/30/98 727-844-2508