

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 Sandra E. Matham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 730559

1. Corporation Name

NORTH HILL PRESERVATION ASSOCIATION, INC.

Principal Place of Business

823 NORTH BAYLEN STREET
 P.O. BOX 12451
 PENSACOLA FL 32582

Mailing Address

823 NORTH BAYLEN STREET
 P.O. BOX 12451
 PENSACOLA FL 32582

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

4. Date Incorporated or Qualified To Do Business in Florida

08/29/1974

5. FEI Number

23-7437278

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
VD	SWINFORD, HARRY	1401 NO BAYLEN ST	PENSACOLA FL 32501
TD	MATHIS, ROGER	206 W LLOYD ST	PENSACOLA, FL 00000 32501
SD	BROWN, KAREN	304 W GADSDEN ST.	PENSACOLA FL 32501
	WAKEMAN, SHARON	315	
PD	ALLEN, JOAN	380 W BRAINERD STREET	PENSACOLA FL 32501
	WILKINS, KEITH	380 380	
PD	JONES, CHARLES R.	611 NORTH BARDELON STREET	PENSACOLA FL 32501
VD	WHITAKER, ROY	1125 NO BAYLEN ST	PENSACOLA FL 32501
D	MAHON, BELINDA	315 WEST LEE STREET	PENSACOLA FL 32501
	BOZEMAN, MARY	122 W. LLOYD ST	

8. Name and Address of Current Registered Agent

JONES, CHARLES R.
 611 NORTH BARCELONA STREET
 PENSACOLA FL 32501

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

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

Charles R. Jones
 REGISTERED AGENT MUST SIGN

Date JAN 20, 1999

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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES R. JONES

1/20/99 (850) 438-9686

Date Daytime Phone #

FILED

99 FEB -1 AM 11:06

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



CR2E040 (9/96)

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North Hill Preservation Association
Post Office Box 12451 • Pensacola, Florida 32582

January 22, 1999

Florida Department of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

Re: North Hill Preservation Association
FEI Number 23-7437278

Dear Division of Corporations:

Enclosed is the Reinstatement Form for our organization, and a check for \$122.50 to cover 1998 and 1999. The original annual renewal document had been previously returned to us as it lacked a signature (payment was enclosed). Based upon discussions with your office, it appears that when we returned it and the check to your office in the spring of 1998, they were not received.

Thank you for your assistance in the reinstatement.

Sincerely,


C. Ray Jones
President
(850) 438-9686

