PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
FILED
03 SEP 10 AM 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
~~REINSTATEMENT~~
REPORT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 754660

600022894566
09/09/03--01109--006 **61.25

1. Corporation Name
CASSEL CREEK PROPERTY OWNERS' ASSOCIATION INCORPORATED

2. Principal Office Address	3. Mailing Office Address
2599 DERBYSHIRE CIR CASSELBERRY FL 32707-5650	2599 DERBYSHIRE CIR
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CASSELBERRY FL	City & State: CASSELBERRY FL
Zip: 32707-5650 Country: SEMINOLE	Zip: 32707-5650 Country: SEMINOLE

4. Date Incorporated or Qualified To Do Business in Florida: MARCH 15, 1982

5. FEI Number: Not Applicable ☐ 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: PEGGY S. WHEELER

Street Address (P.O. Box Number is Not Acceptable): 2571 DERBYSHIRE CIR

Suite, Apt. #, Etc.:

City: CASSELBERRY State: FL Zip Code: 32707-5650

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: Peggy S. Wheeler — REGISTERED AGENT MUST SIGN — Date: 8/30/03

CR2E081 (10/02)

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	RYAN GELDER	2547 DERBYSHIRE CIR	CASSELBERRY, FL 32707-5650
V/D	SUSAN DECUBELLIS	2597 DERBYSHIRE CIR	CASSELBERRY FL 32707-5650
S/D	JANET BRUMBAUGH	2545 DERBYSHIRE CIR	CASSELBERRY FL 32707-5650
T/D	PEGGY S. WHEELER	2571 DERBYSHIRE CIR	CASSELBERRY FL 32707-5650
D	MARITZA VAZQUEZ	2561 DERBYSHIRE CIR	CASSELBERRY FL 32707-5650
D	CONNIE BOWLIN	2585 DERBYSHIRE CIR	CASSELBERRY FL 32707-5650

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: Peggy S. Wheeler — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 8/30/03 Date — 407/331-4798 Daytime Phone #