	PLIAYE REAL	ALL INT	RUMINS	BEFORE C	OMPLET	ING THIS FORM.	
APPLICATION FLAT DAG PARTMENT OF STATE					·.		
REINSTATEMENT DIVI ON OF CORPORATIONS					FILED		
DOCUMENT # 761645 '					97 NOV -6 AM 11: 57		
1. Corporation Name HIGHLANDS COUNTY FAIR ASSOCIATION, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA		
					TALLAHASSEE, PLUMBA		
Principal Place of Business Mailing Ad-			1 100141		188141 ISS	9 Bilgo sobil ossis biral olik oloni blom dibil	DIGIN GURUN GURUN NEGU
P.O. BOX 11 SEBRING FL US	961 . 33870	P OBOX 1981 P.O. BOX 1981 SEBRING FL 33871 US					
If above addresses are incorrect in any way, fine through incorrect. 2. New Principal Office Address, If Applicable 3 New I			ailing Office Address, If Applicable 4. Date In			corporated or Qualified 3usiness in Florida	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			01/28/1982 5. FEI Number Applied For		
City & State		City & State			6.	59-2254081 Not Appl	
Zip Country Zip		Zip	Country			S8.75 Additional Fee required for a Certificate of Status	
7. Names a	and Street Addresses of Each Officer and/or Director (Flo Name of Officers and/or Directors		rida nonprofit corporations must list at least 3 directors Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)			City / State / Zip	
VPD	SPARKS, PAUL		207 MINI RANCH RD.		SEBRING FL		
DS	ADAMS, STUART		303 N EGRET ST			SEBRING FL	
PD	TRAVERS, DAVE		123 MINI-RANCH RD			SEBRING FL	
D	GOSE, JAMES		301 MANGO ST.		SEBRING FL		
ρij	KNOTT, MICHAEL		1717 HYACINTH			SEBRING FL	
D .	TERRELL, BOB	1406 HOMES AVE		E .	SEBRING FL		
Name and Address of Current Registered Agent Name					9. Name and A	Address of New Registered Agen	
SWAINE, J MICHAEL 245 SOUTH COMMERCE				Street Address (P.O. Box Number) 1707 1701 24 1 5 2 - 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			
SEBRING FL 33870			Suite, Apt. #,		· -11/06/9701102002		
				City *******6 State Zin Code *******61.25			¥¥¥81.25
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 Date Date							
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No							
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 filling 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 shell have the same legal effect as if made under oath.							
SIGNATURE: BIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayline Phone #							

Highlands County Fair Association

P.O. Box 1981, Sebring, Florida 33871
Phone (941) 382-2255 • Fax (941) 385-7773



October 24, 1997

John
Florida Department of State
Division of Corporations
Annual Report/Reinstatement Section
P. O. Box 6327,
Tallahassee, Fl. 32314-6327

Dear John,

The Highlands County Fair Association, Inc. filed it's annual report on January 2, 1997 accompanied by a check for \$61.25, check #6584. We received in the noon mail yesterday, October 23, 1997 a certificate of Administrative Dissolution or Revocation, I immediately called your office and spoke with John and was told that there was a bag of damaged mail received in January and that was the probable cause of this action, he instructed me to re-file and submit a new check for \$61.25.

Should you have any questions concerning this filing, please call or fax this office so that we may assist in anyway possible.

Thanking you for your assistance in this matter

Sincerely,

Richard H. McClain

General Manager