

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

99 JAN 21 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-01/22/99-D1087-0086
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REINSTATEMENT

DOCUMENT # 763449

1. Corporation Name

Eastfield Slopes Condominium Association, Inc.

Principal Place of Business

Mailing Address

P.O. Box 16177
Tampa, Florida 33687

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		4. Date Incorporated or Qualified To Do Business in Florida 5/25/82	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEL Number 59-2490833	
City & State		City & State		Applied For Not Applicable	
Zip Country		Zip Country		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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P/T/D	Ernie Underwood	9537 Lake Park Drive	Thonotosassa, FL 33592
VP/D	Ron Styers	9517 Fieldview Circle	Thonotosassa, FL 33592
S/D	Amy Buttram	9533 Lake Park Drive	Thonotosassa, FL 33592
D	Kathy Underwood	9537 Lake Park Drive	Thonotosassa, FL 33592
D	Maria Marty	9504 Lake Park Drive	Thonotosassa, FL 33592

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

James A. Largent
9515 Lake Park Drive
Thonotosassa, Florida 33592

Name
Michael J. McDermott, Esquire
Street Address (P.O. Box Number is Not Acceptable)
791 West Lumsden Road
Suite, Apt. #, Etc.

City
Brandon
State
FL
Zip Code
33511

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

REGISTERED AGENT MUST SIGN

Date 1-5-99

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

Yes ☐ No ☒ NA

(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.

Ernest C. Underwood

SIGNATURE: Ernest C. Underwood
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-99 813-986-6243
Date Daytime Phone #

CR2E040 (1/99)