

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # **N03143**

1. Corporation Name

SUNRUNNER PLACE CONDOMINIUM ASSOCIATION, INC.

03 OCT 29 PM 4:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

C/O CENTRE GROUP PROPERTIES, INC.
4400 BAYOU BLVD SUITE 35
PENSACOLA FL 32503
US

C/O CENTRE GROUP PROPERTIES, INC.
4400 BAYOU BLVD SUITE 35
PENSACOLA FL 32503
US

[Handwritten initials]



REINSTATEMENT 2003

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable C/O FYSBO, INC., REALTORS Suite, Apt. #, etc. 1618 CREIGHTON RD. City & State PENSACOLA, FL 32504 Zip 32504 Country USA		3. New Mailing Office Address, If Applicable C/O FYSBO, INC., REALTORS Suite, Apt. #, etc. 1618 CREIGHTON RD. City & State PENSACOLA, FL 32504 Zip 32504 Country USA		4. Date Incorporated or Qualified To Do Business in Florida 05/17/1984	
		5. FEI Number 59-0242470		Applied For Not Applicable	
		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$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	4 City / State / Zip
P	ARMAND, FRED EUMONT, ELAINE	7171 N 9TH AVE G-12 528 EASTWOOD PLACE	PENSACOLA FL 32504 PENSACOLA, FL 32514
D	BURT, PAUL HINSON, HATTIE	7171 N 9TH AVE G-2 F-10	PENSACOLA FL 32504
DT D	SMITH, PAULINE NELSON, DOROTHY	7171 N 9TH AVE G-12 E-4	PENSACOLA FL 32504
D	VAN DE PLANCK, FRANK SHERMAN, HENRIETTA	7171 N 9TH AVE D-10 G-2	PENSACOLA FL 32504
VP D	ROSEBACK, JOHN HOWARD, BETH	7171 N 9TH AVE D-9 G-9	PENSACOLA FL 32504
D	PERSELL, DIANE	6260 WINDWOOD DR.	PENSACOLA, FL 32504

8. Name and Address of Current Registered Agent LONGWELL, TINA 4400 BAYOU BLVD SUITE 35 PENSACOLA FL 32503		9. Name and Address of New Registered Agent Name PATRICIA MICKELSON Street Address (P.O. Box Number is Not Acceptable) 1618 CREIGHTON RD. Suite, Apt. #, Etc. City PENSACOLA, FL 32504	
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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. or 617.0505, F.S.

Signature of Registered Agent: *[Handwritten Signature]* **SIGNATURE REQUIRED** Date: **10/27/03**
REGISTERED AGENT MUST SIGN

11. 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: *[Handwritten Signature]* **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** Date: **10/27/03** (850) 479-4821 Daytime Phone #

CR2E040 (7/03)