PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

97 DEC 12 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N05079**

1. Corporation Name

HUDSON OAKS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1740 ALDERMAN STREET P.O. BOX 3851 SARASOTA FL 34236	1740 ALDERMAN STREET P.O. BOX 3851 SARASOTA FL ~~34236~~ 34230

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

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip | Country

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc. PO Bx 3851
City & State SARASOTA FL
Zip 34230 | Country

4. Date Incorporated or Qualified To Do Business in Florida 09/11/1984

5. FEI Number 59-2428780 | 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)

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
~~PD~~ VPD	~~PELL, RICHARD~~ Peggy Castillo	1740 ALDERMAN ST. ~~#7~~ #7	SARASOTA FL
TD	JAY, KAREN	1740 ALDERMAN ST #6	SARASOTA FL
~~VPS~~ PD	ROTEN, REX	1740 ALDERMAN ST., #13	SARASOTA FL
D	JAY, SHIRLEY	1740 ALDERMAN ST #15	SARASOTA FL

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REINSTATEMENT (97)

8. Name and Address of Current Registered Agent

KARP, MELISSA A. (AT
630 SOUTH ORANGE AVENUE #200
SARASOTA FL 34236

9. Name and Address of New Registered Agent

Name All Florida Services
Street Address (P.O. Box Number is Not Acceptable) 2831 Ringling Blvd ~~#218F~~
Suite, Apt. #, Etc. 218 F
City Sarasota | State FL | Zip Code 34237

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 Gerald F Bishop
REGISTERED AGENT MUST SIGN
Date 11/10/97

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: Rex A. Roten, Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 12/5/97 Daytime Phone # 941.365.0550

CR2E040 (8/97)