PLEASE READ	ALL INST	BUCTIONS I	BEFORE C	OMPLETI	NG THIS	FORM.	
APPLICATION FOR REINSTATEMENT	FLORIDA	DEPARTMEN Gandra B. Mort Secretary of St VISION OF CORPORA	T OF STATE ham ate		SECRE	FILED TARY OF S	TATE ATTIONS
DOCUMENT # N 09412 1. Corporation Name Watercrest Owners Associated	iation, I	nc.			00 00	7-9 PM 2	: 21
Principal Place of Business 6201 Thomas Drive Panama City Beach, FL 32	Mailing Addre	ss POBex-2 Panama-Gity			. :		
If above addresses are incorrect in any way, line thro 2. New Principal Office Address, If Applicable	ng Office Address, If Applicable I Thomas Drive		Date Incorporated or Qualified To Do Business in Florida 5/22/1985				
& State Suite, Apt. #. Country Zip		City Beach, FL		5. FEI Number Applied For S92413827 Not Applieable 6. \$8.75 Additional Fee required			
7. Names and Street Addresses of Each Officer and/ Name of Officers	mes and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must l Name of Officers Street Address				OF STATUS DESI	City / State /	ertificate of Status
PD William P. Young VPD Howard Mosley		104 Sunset Court 1110 Commanche Trail			Anniston	on, GA 30 , AL 3620	6
SD Brenda Freeman TD H. M. Greenberg D Donnie McKean D Tommy Payne		2317 Magno 6201 Thoma 118 Woodla 1436 Clem/	is Drive # nwn Drive	Panama City Beach, FL 32407			
D Larry J. Traylor Timothy Hughes	P. O. Box 700 Besthe			Carrollt	GA 30108 on, GA 30	117	
D. Ronald E. Hardy	0201 IIIOMa	is blive w	1501 Panama City Beach, FL 32408 4000342932410/19/0001017003 ***4736.25 *****236.25				
8. Name and Address of Current Registered Agent Name				9. Name and A	Address of New	Registered Agen	it
The Watercrest Rental Co. 6201 Thomas Drive Panama City Beach, FL 324	Brian D Street Address		(P.O. Box Number is Not Acceptable) ont Beach Road				
•	reation am familiar wit	City Panama C	ity	on 607 0505 F.	FL 3	p Code 32407	
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							60
11. This corporation owes or handible Personal Proper	as paid th ty tax due	e current yea June 30.	Yes 🗆] -No <u></u>	(See other side for on intangible	
12. I certify that I am an officer or director or the rece this reinstatement application, the reason for diss- owed by the corporation have been paid and the on this application is true and accurate, and my si	olution has been names of individ	eliminated, the corpor luals listed on this forn	rate name satisties n do not qualify for	i the requirements an exemption und	of section 607.0	401 or 617.0401.	P.S., that all rees
SIGNATURE: Addition	Jun	- Dies.	NIDECTOR	13.9	1/21/00	Davies	AD
SIGNATURE AND TYPED OR PR	HALED HAME OF	SIGNING OFFICER OR D	IMECTOR .		- Date .	Daytime	STRUMENT STATES