

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

98-99 AR

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

99 OCT 13 AM 11:55

DOCUMENT # N24077

1. Corporation Name

FLEMINGBROOK OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

6028 Chester Ave.
 Suite 202
 Jacksonville, FL 32217

P.O. Box 57911
 Jacksonville, FL 32241

000003020140-4
 --10/21/99--01003--001
 ****122.50 ****122.50

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
 12/23/1987

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number
 59-2880300

Applied For
 Not Applicable

City & State

City & State

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

Zip

Country

Zip

Country

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 (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
PD	Tom Helock	5608 Fallbrook Ct.	Orange Park, FL 32073
D	Kristy Barker	433 Baybrook Dr.	Orange Park, FL 32073
D	William Russell	628 Cozybrook Ln.	Orange Park, FL 32073
D	Trish Taylor	513 Timbercrest Ln.	Orange Park, FL 32073
D	Eugene Vanderbeek	5509 Bloomwood Ct.	Orange Park, FL 32073

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name
 Patric R. Penn
 Street Address (P.O. Box Number is Not Acceptable)
 6028 Chester Ave.
 Suite, Apt. #, Etc.
 Suite 202
 City
 Jacksonville
 State
 FL
 Zip Code
 32217

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

Patric R. Penn

REGISTERED AGENT MUST SIGN

Date 9/28/99

11. This corporation owes 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 taxes 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 furnished on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Thomas Helock

Tom Helock

10/3/99

Date

904-359-3454

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E001 (12/98)