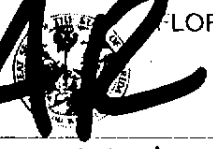


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
OR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Northam
Secretary of State

DIVISION OF CORPORATIONS

FILED

97 SEP 11 PM 4: 25

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # N48148

1. Corporation Name

The Colony Association of Nassau County, Inc.

Principal Place of Business

Mailing Address

4754 LeMon Lane
Amelia Island, FL 32034

4754 LeMon Lane
Amelia Island, FL 32034

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

04/01/1992

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

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)

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
Pres.	Louis E. Laubscher	Federal Trust Bank 1211 Orange Avenue	Winter Park, FL 32789
Dir.	Aubrey Wright	Federal Trust Bank 1211 Orange Avenue	Winter Park, FL 32789
Dir.	James V. Suskiewich	Federal Trust Bank 1211 Orange Avenue	Winter Park, FL 32789
Dir.	Thomas Hildebrand	4762 St. Marc Ct.	Amelia Island, FL 32034
Dir.	Jeff Webster	4732 Westwind Ct.	Amelia Island, FL 32034
Dir.	Dan Dinkins	4815 Westwind Ct.	Amelia Island, FL 32034

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DeVries, Roxanne
4754 LeMon Lane
Amelia Island, FL 32034

Name
Laubscher, Louis E.
Street Address (P.O. Box Number is Not Acceptable)
1211 Orange Avenue
Suite, Apt. #, Etc.
500002293365--4
City
Winter Park
State
FL
Zip Code
32789

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 *Louis Laubscher*
REGISTERED AGENT MUST SIGN

Date **8-22-97**

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. 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:

Louis E. Laubscher
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Louis E. Laubscher

8-22-97 (407) 645-1201
Date Daytime Phone #

CR2E040 (12/96)