PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

Fax Audit No. H04000123842

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000003649

1. Corporation Name
AUDUBON PARK PROPERTY OWNERS ASSOCIATION, INC.

REINSTATEMENT

2. Principal Office Address	3. Mailing Office Address
9115 Audubon Park Lane	9115 Audubon Park Lane
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville, Florida	City & State: Jacksonville, Florida
Zip: 32257 Country: US	Zip: 32257 Country: US

4. Date Incorporated or Qualified To Do Business In Florida 8/12/93

5. FEI Number 593199997 ☐ Applied For ☐ Not Applicable

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

7. Name and Address of Current Registered Agent

Name: William Block

Street Address (P.O. Box Number is Not Acceptable): 9115 Audubon Park Lane

Suite, Apt. #, Etc.

City: Jacksonville State: FL Zip Code: 32257

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent: William Block — REGISTERED AGENT MUST SIGN

Date: June 9, 2004

CR2E085 (01/04)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DPT	William Block	9115 Audubon Park Lane	Jacksonville, FL 32257
DS	Kathy Newman	9141 Audubon Park Lane	Jacksonville, FL 32257
D	Cindy Cohen	9133 Audubon Park Lane	Jacksonville, FL 32257

10. 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: William Block — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 9, 2004 — Date

26,9949 — Daytime Phone #

Division of Corporations

Florida Department of State

Division of Corporations
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CORPORATION REINSTATEMENT

AUDUBON PARK PROPERTY OWNERS ASSOCIATION, INC.

Certificate of Status	0
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