

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REINSTATEMENT 97-98

APPLICATION FOR REINSTATEMENT

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



DOCUMENT # N96000000171

1. Corporation Name
Lake Grove Property Owners' Association, Inc.

Principal Place of Business Mailing Address

**3077 SE Dixie Hwy.
Stuart, FL 34994** **3077 SE Dixie Hwy.
Stuart, FL 34994**

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

2. New Principal Office Address, If Applicable 1172 SW 30th St. Suite, Apt. #, etc.		3. New Mailing Office Address, If Applicable 1172 SW 30th St. Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida January 8, 1996	
City & State Palm City, FL 34990		City & State Palm City, FL 34990		5. FEI Number 65-0461431 Applied For Not Applicable	
Zip 34990	Country US	Zip 34990	Country US	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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
P/D	Brian Higley	4953 SW Lake Gorge Circle	Palm City, FL 34990
VP/D	Raleigh P. Nelson	One Hill Farm Court	St. Paul, MN 55127
S/D	Jenell Atlas	4911 SW Lake Grove Circle	Palm City, FL 34990
T/D	Traci Verzi	4899 SW Lake Grove Circle	Palm City, FL 34990

8. Name and Address of Current Registered Agent John E. Prewitt 310 SW Ocean Blvd. Stuart, FL 34994 US		9. Name and Address of New Registered Agent Name Thomas R. Sawyer Street Address (P.O. Box Number is Not Acceptable) 2081 E. Ocean Blvd. Suite, Apt. #, Etc. 2nd Floor City Stuart State FL Zip Code 34996	
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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: *Thomas R. Sawyer* Date: **2/17/98**
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No Exempt (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: *Brian Higley* Date: **2/17/98** Daytime Phone #: **561-221-1060**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Brian Higley, President

CR2E040 (1/98)