

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # N96000000817

1. Corporation Name

Field Club Community Association, Inc.

Mailing Address

Principal Place of Business

1486 Seminola Boulevard
Unit 8
Casselberry, FL 32707

Same as Mailing Address

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

2. New Mailing Address, If Applicable

3. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

February 22, 1996

5. FEI Number

59-3374117

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$9.75 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
PD	Arthur Bradford	1486 Seminola Blvd., Unit 8	Casselberry, FL 32707
ST	Andrew L. Temmel	1486 Seminola Blvd., Unit 8	Casselberry, FL 32707
D	Thomas G. Temmel	1486 Seminola Blvd., Unit 8	Casselberry, FL 32707

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8. Name and Address of Current Registered Agent

Kenneth F. Oswald
600 Courtland Street
Suite 110
Orlando, FL 32804

9. Name and Address of New Registered Agent

Name

CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

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

Karen B. Rozar

REGISTERED AGENT MUST SIGN

Karen B. Rozar, As Its Agent

Date

12-30-97

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☒ (See other side for additional information.)

12. 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.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: *Andrew J. Temmel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-29-97 407-699-7320

Date

Daytime Phone #



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 652293 6465A

AUTHORIZATION : *Patricia Pizzuto*

COST LIMIT : \$ 236.25

ORDER DATE : December 30, 1997

ORDER TIME : 10:13 AM

ORDER NO. : 652293-005

CUSTOMER NO: 6465A

CUSTOMER: Ms. Cat L. Brower
Giles & Robinson, P.a.
P. O. Box 2631

Orlando, FL 32802

DOMESTIC FILINGS

NAME: FIELD CLUB COMMUNITY
ASSOCIATION, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

EXAMINER'S INITIALS _____

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