

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED

99 OCT 25 AM 11:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N96000004950**

1. Corporation Name

RIVER MOORINGS OWNERS' ASSOCIATION, INC.

Principal Place of Business

415
470 RIVER MOORINGS DRIVE
MERRITT ISLAND FL 32953

Mailing Address

495
470 RIVER MOORINGS DRIVE
MERRITT ISLAND FL 32953

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

2. New Principal Office Address, If Applicable

~~495 RIVER MOORINGS DRIVE~~
Suite, Apt. #, etc.
MERRITT ISLAND FL
City & State

3. New Mailing Office Address, If Applicable

~~495 RIVER MOORINGS DRIVE~~
Suite, Apt. #, etc.
MERRITT ISLAND FL
City & State

REINSTATEMENT

99¹⁰

4. Date Incorporated or Qualified To Do Business in Florida

09/23/1996

5. FEI Number

59-3460156

Applied For

Not Applicable

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 | 4 City / State / Zip |
|------------|---|--|--|
| PD | GALLINAN, JOHN J FINNIGAN, ROGER G | 470 RIVER MOORINGS DRIVE 495 | MERRITT ISLAND FL 32953 |
| SD | STAPLES, GERRI | 510 RIVER MOORINGS DRIVE | MERRITT ISLAND FL 32953 |
| TD | GOHIL, SARYU | 670 RIVER MOORINGS DRIVE | MERRITT ISLAND FL 32953 |
| VPD | PRITCHARD, RON | 495 MOHAWK TRAIL | MERRITT ISLAND FL 32953 |
| VPD | HARLAND, BERNIE PELL, LONNIE | 330 CHERRY DRIVE 670 RIVER MOORINGS DRIVE | SATELLITE BEACH FL 32907 MERRITT ISLAND, FL 32953 |

8. Name and Address of Current Registered Agent

MEWYHART, ANDREW W
160 MCLEOD ST.
MERRITT ISLAND FL 32953

9. Name and Address of New Registered Agent

Name
Menyhart, Andrew W.
Street Address (P.O. Box Number is Not Acceptable)
400003034184--2
Suite, Apt. #, Etc.
11703/99-01074-001
*****236.25 ***236.25**
City
FL State Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 807.0505, F.S.

Signature of Registered Agent

Andrew W. Menyhart
REGISTERED AGENT MUST SIGN

Date **10/22/99**

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 807 or 817, 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 807.0401 or 817.0401, 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:

Roger Finnigan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-19-99 Date **407-459-2775** Daytime Phone #