

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR '99
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 NOV 16 PM 4:14

DOCUMENT # N96000006215

1. Corporation Name

CHESAPEAKE PLACE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2700 HADLEY ROAD
TALLAHASSEE FL 32312

2700 HADLEY ROAD
TALLAHASSEE FL 32312



REINSTATEMENT 99

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

12/06/1996

Suite, Apt. #, etc.
~~2878 REMINGTON GREEN CIR~~
City & State
~~TALLAHASSEE FL~~

Suite, Apt. #, etc.
2878 REMINGTON GREEN CIRCLE
City & State
TALLAHASSEE FL

5. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip 32308

Country LGW

Zip 32308

Country LGW

6. CERTIFICATE OF STATUS DESIRED \$5.75 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
D	SKIPPER, STEPHEN B	2700 HADLEY ROAD	TALLAHASSEE FL 32312
D	QUICK, TOM	2700 HADLEY ROAD	TALLAHASSEE FL 32312
D	SIMMONS, JOHN	2700 HADLEY ROAD	TALLAHASSEE FL 32312
D	JERALD D COLLMAN	2878 REMINGTON GREEN CIR TALLAHASSEE FL 32308	TALLAHASSEE FL 32308
D	LORIN J. LEE	2878 REMINGTON GREEN CIR	TALLAHASSEE FL 32308
D	Steve Reznik	2878 Remington Green Cir	Tallahassee FL 32308

8. Name and Address of Current Registered Agent

SKIPPER, STEPHEN B
2700 HADLEY ROAD
TALLAHASSEE FL 32312

9. Name and Address of New Registered Agent

Name
JERALD D COLLMAN
Street Address (P.O. Box Number is Not Acceptable)
2878 REMINGTON GREEN CIRCLE
Suite, Apt. #, Etc.
000003061040--6.
City
Tallahassee
-12706795
236 FL 23625

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0506, F.S.

Signature of Registered Agent Jerald D. Collman
REGISTERED AGENT MUST SIGN

Date 10/15/99

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 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: Jerald D. Collman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 10/15/99
Daytime Phone # (850) 222-0553

CR25040 (8/99)