

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

07 JUN -1 AM 7:51

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N03000009922

1. Corporation Name

Pioneer Trails I, II, & III Property Owners Association, Inc.

000104526540
06/19/07--01002--008 **297.50

2. Principal Office Address - No P.O. Box #
3644 Pioneer Trails Street

3. Mailing Office Address
P O Box 93433

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Lakeland, FL

City & State
Lakeland, FL

Zip
33810

Country
Polk

Zip
33804

Country
POLK

REINSTATEMENT 06-07

CR2E081 (1/07)

**4. Date Incorporated or Qualified
To Do Business in Florida** September 21, 1998

5. FEI Number
58-2454495

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
Donna Rose

Street Address (P.O. Box Number is Not Acceptable)
3158 Pioneer Trails Loop

Suite, Apt. #, Etc.

City
Lakeland, FL

State
FL

Zip Code
33810

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent Donna Rose

Date 5/25/07

REGISTERED AGENT MUST SIGN

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
Pres.	Farris, Roger	3644 Pioneer Trails Street	Lakeland, FL 33810
V Pres.	Stern, Nancy	3697 Pioneer Trails Drive	Lakeland, FL 33810
Treas.	Hilterman, Robert	3533 Pioneer Trails Drive	Lakeland, FL 33810
Sec.	Rose, Donna	3158 Pioneer Trails Loop	Lakeland, FL 33810

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 contained in Chapter 119, 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 Farris - Association President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-25-07
Date

863-816-0556
Daytime Phone #

PC 6/7