

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 MAY 22 AM 10: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

77-02

DOCUMENT # 718656

1. Corporation Name

Sun Haven Community Association,
a Corporation, Not for Profit.

2. Principal Office Address

3331 Yorktown Street

3. Mailing Office Address

3331 Yorktown Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sarasota, Florida

City & State

Sarasota, Florida

Zip

34231

Country

Sarasota

Zip

34231

Country

Sarasota

4. Date Incorporated or Qualified
To Do Business in Florida

4/15/1957

5. FEI Number

59-3307025

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

Candy Roberts

700005694607--5

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

3331 Yorktown Street

06/06/02-01054-014

***1776.25 ***1776.25

Suite, Apt. #, Etc.

City

Sarasota

State
FL

Zip Code
34231

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

Date 3/12/02

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
P/D	Jimmy Porter	3230 Yorktown Street	Sarasota, FL 34231
VVP/D	Judy Porter	3230 Yorktown Street	Sarasota, FL 34231
Sec./ T/D	Mike Wayne	3235 New England St.	Sarasota, FL 34231
D	Candy Roberts	3331 Yorktown Street	Sarasota, FL 34231

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 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:

- MIKE WAYNE, SEC/TREAS

Date

3/13/02 941 365 7195

Daytime Phone #

CR2E081 (9/01)