

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

1998 MAR 17 PM 1:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 730538

1. Corporation Name

SUNNY HILLS CIVIC AND IMPROVEMENT ASSOCIATION,  
INC.

Principal Place of Business

Mailing Address

ADMIN BLDG.  
SUNNY HILLS BLVD.  
CHIPLEY FL 32428

ADMIN BLDG.  
SUNNY HILLS BLVD.  
CHIPLEY FL 32428

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

2. New Principal Office Address, If Applicable

P O Box 423

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

P O Box 423

Suite, Apt. #, etc.

City & State

Wausau FL

City & State

Wausau FL

Zip

32463

Country

USA

Zip

32463

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

08/27/1974

5. FEI Number

59-2667038

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
VP	SEDANO, CHUCK Weekley, Randall	527 COUNTRY CLUB BLVD 2010 Killian Drive	SUNNYHILLS FL Chipley FL 32428
P/D	WILLIAMS, STEVE Lesa McLean	608 ROSEWAY AVE. 4017 Chapel Ave	SUNNYHILLS FL 32428 Chipley FL 32428
S/T	SEDANO, PAT Betty Lee Weekley	527 COUNTRY CLUB BLVD 2010 Killian Drive	SUNNYHILLS FL Chipley FL 32428
D	ARLAUCKAS, AL LaRocca, Sal	540 AMBASSADOR COURT 4015 Chapel Ave	SUNNYHILLS FL Chipley FL 32428
D	BELECKAS, GENE Wasilewski, Henry	540 AMBASSADOR CT 411 Cambridge Drive	SUNNYHILLS FL 32428 Chipley FL 32428
D	URMANIS, PEGGY FRENCH, June	420 PRESTON CIRCLE 2023 Ambassador Ct.	SUNNYHILLS FL Chipley FL 32428

8. Name and Address of Current Registered Agent

MONGOVEN (WILLIAM J.)  
105 SOUTH FIFTH STREET  
CHIPLEY FLORIDA FL 32428

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

600002462816-0

03/20/98-01007-002

State Zip Code  
\*\*\*315.00 \*\*\*315.00

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

W. J. Mongoven  
REGISTERED AGENT MUST SIGN

Date 1-27-98

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information  
on intangible tax.)

12. 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)(l), 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:

LESIA A. McLean  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-27-98  
Date

773-3243  
Daytime Phone #

CR20040 (05/97)