PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 JAN 13 AM 9:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 750864

1. Corporation Name

OAKWOOD VILLAGE CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
13122 E HWY 25 OKLAWAHA FL 32179 US	13122 E. HIGHWAY 25 SUITE #16 OKLAWAHA FL 32179 US

600010061258
01/13/03--01097--003 **61.25

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	316 VELMA DR
City & State		City & State	LARGO FL
Zip	Country	Zip	33770 Country USA

4. Date Incorporated or Qualified To Do Business in Florida: 01/31/1980

5. FEI Number: 59-2105352 ☐ 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	~~KEENE, PEGGY~~ RAYMOND HAM	~~13122 E HWY. 25 #14~~ 5243 NW 82 CT	~~OCKLAWAHA FL 32179~~ OCALA 34482
SD	LITT, JUDY	13122 E. HIGHWAY 25, BOX 1	OCKLAWAHA FL 32179
D	GALLOWAY, JIM	13122 E HWY 25 #5	OKLAWAHA FL 32179
TD	~~HAM, RAYMOND~~ DEBORAH WILSON	13122 E. HIGHWAY 25, #~~5~~ 4	OCKLAWAHA FL 32179

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
LITT, GORDON H. 13122 E. HIGHWAY 25 SUITE #1 OCKLAWAHA FL 32179	Name: Jim Janowski Street Address (P.O. Box Number is Not Acceptable): 316 Velma Dr Suite, Apt. #, Etc.: City: Largo FL State: FL Zip Code: 33770

CR2E040 (8/02)

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. or 617.0505, F.S.

Signature of Registered Agent: SIGNATURE REQUIRED Date:
REGISTERED AGENT MUST SIGN

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: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Div of Corporations
Annual Report/Reinstatement
P O Box 6327
Tallahassee FL 32314-6327

Dec 26, 2002

To: Reinstatement Section;

Oakwood Village Condo., Inc is a small group of 15 cabin owners with a fluctuating executive board membership. I took office as Treasurer in June and have had little to go on as to who is responsible for duties. When this notice was received in a mailbox that gets very little mail, I wasn't too sure what to do with it so questioned other board members.

This notice of dissolution is the only notice that I have seen, and it seems that it is the only one that any of the board members have seen. No one can recall receiving any other notification of late payments or late filing.

We ask that you waive the reinstatement fee and accept our annual $61.25 payment. In order to assure that this does not happen in the future, we have changed the registered agent to the name and address of the gentleman that prepares our tax returns.

Thank you,

Deborah Wilson

Deborah Wilson, Treasurer
For Oakwood Village Cond., Inc