

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
09 FEB 25 PM 2:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 767762

1. Corporation Name

MARION OAKS VOLUNTEER EYES, INCORPORATED

**REINSTATEMENT 07-09**

CR2E081 (12/08)

2. Principal Office Address - No P.O. Box #

294 MARION OAKS LANE

Suite, Apt. #, etc.

MARION OAKS Community Center

City & State

Ocala, Florida

Zip

34473

Country

USA

3. Mailing Office Address

294 MARION OAKS LANE

Suite, Apt. #, etc.

MARION OAKS Community Center

City & State

Ocala, Florida

Zip

34473

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

MARCH 31, 1983

5. FEI Number

59-2348068

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

Juanita Valentin

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

14864 SW 35<sup>th</sup> Circle

Suite, Apt. #, Etc.

City

Ocala

State

FL

Zip Code

34473

☒ 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

REGISTERED AGENT MUST SIGN

Date 2-23-09

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
V	Nancy Sullivan	14875 SW 35 <sup>th</sup> Circle	Ocala, Florida 34473
T	NORM WINTER	3359 SW 137 <sup>th</sup> Loop	Ocala, Florida 34473
P	Juanita Valentin	14864 SW 35 <sup>th</sup> Circle	Ocala, Florida 34473
S	Alice Pantaleo	262 Marion Oaks Course	Ocala, Florida 34473
200144411072 02/25/09--01027--007 **183.75			

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-23-09

Date

352-347-2008

Daytime Phone #

2/25/09