

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

37 DEC 31 AM 9:25

900113516339
12/31/07--01018--002 **61.25



DOCUMENT # 768329 1. Entity Name OAK MEADOW CONDOMINIUM ASSOCIATION OF PENSACOLA, INCORPORATED	
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Principal Place of Business 7225 W. FAIRFIELD DRIVE PENSACOLA, FL 32506 US	Mailing Address P. O. BOX 36185 PENSACOLA, FL 32516-6185 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

11062007 REIN-NP CR2E099 (1/07)

4. FEI Number 59-2296537	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BUECHLER, FRANCINE 7225 W FAIRFIELD DR UNIT C-3 PENSACOLA, FL 32506

7. Name and Address of New Registered Agent Name <u>Karl Cain</u> Street Address (P.O. Box Number is Not Acceptable) <u>7225 W. Fairfield DR</u> <u>Unit D-3</u> City <u>PENSACOLA</u> FL Zip Code <u>32506</u>

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$61.25 After January 1, 2008, Fee will be \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KING, DOT 7225 W. FAIRFIELD DR B-1 PENSACOLA, FL 32506 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Eric Lange 7225 W. FAIRFIELD DRIVE APT F-2 PENSACOLA, FLORIDA 32506 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BD PERKINS, BONNIE 7225 W. FAIRFIELD DRIVE, F-1 PENSACOLA, FL 32506 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Board Member JAMES ELLIS 7225 W. FAIRFIELD DRIVE APT F-6, F-7 PENSACOLA, FLORIDA 32506 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUECHLER, FRANCINE 7225 W. FAIRFIELD DR. B-7 PENSACOLA, FL 32506 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Karl Cain 7225 W. FAIRFIELD DRIVE APT D-3 PENSACOLA, FLORIDA 32506 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BD BENNETT, DORIS 7225 W. FAIRFIELD DRIVE, C-7 PENSACOLA, FL 32506 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Board Member Kathy Mercer 7225 W. FAIRFIELD DRIVE APT C-7 PENSACOLA, FLORIDA 32506 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BD MITCHELL, BRENDA 7225 W. FAIRFIELD DRIVE, A-5 PENSACOLA, FL 32506 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Board Member Dot King 7225 W. FAIRFIELD DRIVE APT B-1 PENSACOLA, FLORIDA 32506 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STATEMENT <u>12/18/08</u> <u>57108</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Debbie Augustine 7225 W. FAIRFIELD DRIVE APT D-6 PENSACOLA, FLORIDA 32506 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karl Cain 12/10/07 (850) 723-5215
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #