

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

**CORPORATION
REINSTATEMENT**



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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 DEC -3 AM 9:21

DOCUMENT # m97791

1. Corporation Name

The Cove Condominium Development, Inc.
(A Nominee Corporation)

2. Principal Office Address

759 North Edgewood Ave.

Suite, Apt. #, etc.

City & State

Jacksonville, FL

Zip

32205

Country

Duval

3. Mailing Office Address

759 North Edgewood Avenue

Suite, Apt. #, etc.

City & State

Jacksonville, FL

Zip

32205

Country

Duval

**4. Date Incorporated or Qualified
To Do Business in Florida**

09/08/1988

5. FEI Number

59-2992110

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

Howard K. O'Steen

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

759 North Edgewood Avenue

Suite, Apt. #, Etc.

City

Jacksonville

State

FL

Zip Code

32205

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**

Howard K. O'Steen

Date 11/29/2001

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	Howard K. O'Steen	759 North Edgewood Avenue	Jacksonville, FL 32205
V,D	Harold S. O'Steen	759 North Edgewood Avenue	Jacksonville, FL 32205

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)(f), 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:

Howard K. O'Steen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/29/2001 (904) 389-5372

Date

Daytime Phone #

CR2E061 (9/00)

202

Howard K. O'Steen
759 North Edgewood Avenue
Jacksonville, FL 32205

November 30, 2001

Department of State
Division of Corporations
400 East Gaines Street
Tallahassee, FL 32399

Re: The Cove Condominium Development, Inc. - Reinstatement Application

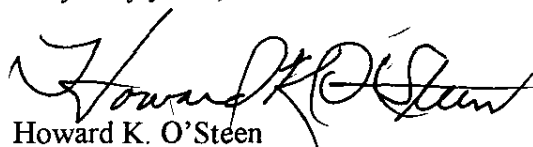
Dear Sir or Madam:

Enclosed please find the Corporation Reinstatement Form for The Cove Condominium Development, Inc. (a nominee corporation). This corporation was administratively dissolved on August 26, 1994 due to the failure of the corporation to file its annual report with your office. Also enclosed is my check in the amount of \$1,808.75 to cover the cost of the corporation reinstatement and the \$8.75 additional fee for certification of the corporation's status.

I respectfully request that you expedite the reinstatement of the corporation and Federal Express back to me the Certificate of Status. I have enclosed a pre-paid Federal Express label for your use in sending the Certificate of Status back to me.

If you have any questions or require any additional information, please telephone me at (904) 635-4134. Your prompt attention to this matter is appreciated.

Very truly yours,


Howard K. O'Steen

HKO/sgw
Enclosures