

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 DEC 12 PM 12:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300025467423

12/12/03--01068--026 **236.25

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 000000001470

1. Corporation Name

Stillwater homeowners Association, Inc.

2. Principal Office Address

397 Interstate Blvd.

Suite, Apt. #, etc.

City & State

Sarasota, Florida

Zip

34240

Country

U.S.A.

3. Mailing Office Address

397 Interstate Blvd.

Suite, Apt. #, etc.

City & State

Sarasota, Florida

Zip

34240

Country

U.S.A.

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

3/7/2000

5. FEI Number

65-1036924

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

Andrew K. Fritsch

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

2033 Main Street

Suite, Apt. #, Etc.

Suite 600

City

Sarasota

State

FL

Zip Code

34237

REINSTATEMENT 03

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

AKF

REGISTERED AGENT MUST SIGN

Date 12/1/03

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
PD	Robert Suida	397 Interstate Blvd.	Sarasota, FL 34240
VPD	Michael Widman	397 Interstate Blvd.	Sarasota, FL 34240
STD	Christine Keller Coles	397 Interstate Blvd.	Sarasota, FL 34240
D	Andrew K. Fritsch	2033 Main St., Ste. 600	Sarasota, FL 34237

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)(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:

AKF
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/1/03 (941) 957-8134
Date Daytime Phone #

CR2E081 (10/02)