

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 AUG -3 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N00000002707

1. Corporation Name
The Trails of Titusville
Homeowners Association, Inc.

2. Principal Office Address - No P.O. Box #
1053 Maitland Center Commons Blvd.

Suite, Apt. #, etc.
Suite 200

City & State
Maitland FL

Zip Country
32751 USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip Country

CR2E081 (1/07)

4. Date Incorporated or Qualified To Do Business in Florida
4/20/2000

5. FEI Number
33-1001219

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Berry J. Walker, Jr.

Street Address (P.O. Box Number is Not Acceptable)
1053 Maitland Center Commons Blvd.

Suite, Apt. #, Etc.
Suite 200

City State Zip Code
Maitland FL 32751

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 [Signature] Berry J. Walker, Jr. Date 7/13/07
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
PSTD	Berry J. Walker, Jr.	1053 Maitland Center Commons Blvd.	Maitland FL 32751
VD	Berry J. Walker, Sr.	1053 Maitland Center Commons Blvd.	Maitland FL 32751
D	Wallace W. Tudhope	1053 Maitland Center Commons Blvd.	Maitland FL 32751

REINSTATEMENT 03-07

500106340825
07/18/07--01040--005 **236.25
500106340825
08/16/07--01036--021 **245.00

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] 7/13/07 407-478-1864
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
Berry J. Walker, Jr.