

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

03 APR 23 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N00000003111

1. Corporation Name

SUNDANCE VILLAGE MOBILE HOME OWNERS
ASSOCIATION, INC.

HA

2. Principal Office Address

2146 Overseas Highway

Suite, Apt. #, etc.

City & State

Marathon, FL

Zip

33050

Country

USA

3. Mailing Office Address

c/o Frank D. Greenman, Esq.

Suite, Apt. #, etc.

5800 Overseas Hwy, Suite 40

City & State

Marathon, FL

Zip

33050

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

05/10/2000

5. FEI Number

Applied For

☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

12/12/02 01037 008 \$183.75

7. Name and Address of Current Registered Agent

Name

Franklin D. Greenman, Esquire

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

5800 Overseas Highway

Suite, Apt. #, Etc.

Suite 40

City

Marathon

State

FL

Zip Code

33050

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

Franklin D. Greenman

REGISTERED AGENT MUST SIGN

Date

4-23-03

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
P/D	Dale Hogue	2146 Oversea Highway, Lot 6	Marathon, FL 33050
V/D	Bruce Adams	2146 Overseas Highway, Lot 28	Marathon, FL 33050
D	Bill Taute	2146 Overseas Highway, Lot 13	Marathon, FL 33050

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:

Dale Hogue Dale Hogue

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-23-03

(305) 304-1788

Daytime Phone #

CR2E081 (10/02)