

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

FILED

02 APR 22 AM 10:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # NO00000007268

1. Corporation Name Rum Island Condominium  
Owners Association

**REINSTATEMENT** 01-02

2. Principal Office Address  
8139 Carmona St.

3. Mailing Office Address  
P.O. BOX 2259

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Navarre, FL

City & State  
Ft. Walton Beach, FL

4. Date Incorporated or Qualified  
To Do Business in Florida Dec. 9, 2000

Zip 32566 Country USA

Zip 32549 Country USA

5. FEI Number 59-3693223

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 Thomas J. Risalvato

Street Address (P.O. Box Number is Not Acceptable)  
348 SW Miracle Strip Pkwy

200005431332-3

Suite, Apt. #, Etc. Suite 34

-05/02/02--01040--029  
\*\*\*306.25 \*\*\*306.25

City Ft. Walton Beach

State FL Zip Code 32548

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 Thomas J. Risalvato

Date 10-31-01

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
D	Michael Coupe	228 Amberjack Dr #39	Ft. Walton Bch, FL 32548
D	Bruce Ravan	P.O. BOX 1061	Ft. Walton Bch, FL 32549
D	Phillip Roy	8139 Carmona St.	Navarre, FL 32566

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)(l), 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]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 10-31-01 850-217-5628  
Daytime Phone #

CR2ED01 (9/00)



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

December 27, 2001

RUM ISLAND CONDOMINIUM OWNERS ASSOCIATION, INC.  
P.O. BOX 2259  
FT. WALTON BEACH, FL 32549

SUBJECT: RUM ISLAND CONDOMINIUM OWNERS ASSOCIATION, INC.  
Ref. Number: N00000007268

~~Please be advised, we have received your annual report/uniform business report,~~  
however, the report **has not been filed** and a copy is being returned for the  
following correction(s):

Provide the title(s) of each officer/director listed on the report or on an  
attachment.

A non-profit corporation must list three (3) directors or (3) trustees and their  
street addresses in block 10 or 11. Use a "D" or "T" to designate the title.

Please note that an additional \$61.25 must be submitted to cover the filing fee for  
the year 2002 if your reinstatement is not returned prior to January 1, 2002.

After the corrections have been made, please return the report to: Division of  
Corporations, Annual Report/Uniform Business Report Section, P.O. Box 6327,  
Tallahassee, Florida 32314 within 30 days from the date of this letter.

**TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE  
RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF  
THE DATE OF THIS LETTER.**

If you have any questions concerning the filing of your document, please call  
(850) 245-6059.

Tyrone Scott  
Document Specialist

Letter Number: 801A00067336



# CARR • RIGGS & INGRAM, LLP

CERTIFIED PUBLIC ACCOUNTANTS  
BUSINESS CONSULTANTS

*A Limited Liability Partnership*

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April 17, 2002

Florida Department of State  
Katherine Harris  
Secretary of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

RE: Rum Island Condominium Owners' Association

Dear Ms. Harris:

Please be advised that we did not receive the original uniform business report. This is the letter stating non-receipt to that the \$400.00 late fee can be waived.

If you have any questions or concerns, please contact this office.

Sincerely,

*Thomas J. Risalvato*

Thomas J. Risalvato, CPA  
Carr, Riggs & Ingram, LLP

Enclosures

FORT WALTON BEACH  
348 SW MIRACLE STRIP  
PARKWAY, SUITE 34  
FORT WALTON BEACH  
FLORIDA 32548  
(850) 244-8395  
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AN INDEPENDENT MEMBER