PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

97 ap

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 NOV 21 PM 11:56

DOCUMENT # N00616

1. Corporation Name

SOUTHWOOD 2, TOWNHOUSE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O CENTURY 21 ALL AMERICA 3312 W. UNIVERSITY AVE GAINESVILLE FL 32606 US	C/OCENTURY 21 ALL AMERICA 3312 W. UNIVERSITY AVE GAINESVILLE FL 32606 US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
c/o Century 21 All America	Same
Suite, Apt. #, etc. 24 NW 33rd Ct. Ste A	Suite, Apt. #, etc.
City & State Gainesville FL	City & State
Zip 32607 Country Alachua	Zip Country

4. Date Incorporated or Qualified To Do Business In Florida: 12/28/1983

5. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	JACKSON, MARY	3933 SW 26TH DR., #A	GAINESVILLE FL
VD	GANEY, BARBARA	3914 SW 26TH DR., #A	GAINESVILLE FL
STD	MOORE, DOROTHY	5821 NW 91ST BLVD	GAINESVILLE FL

2/20/77 92156/026 $61.25

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
WEIHE, ROSE 3312 WEST UNIVERSITY AVE GAINESVILLE FL 32607	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State FL Zip Code

CR2E040 (8/97)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Rose Weihe
REGISTERED AGENT MUST SIGN
Date 11/4/97

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☒ No ☒

(See other side for information on intangible tax.)

12. 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: Mary K Jackson MARY K JACKSON 11-19-97 352-373-6335
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #