

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 NOV -7 AM 10:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

192

REINSTATEMENT

CR2E081 (12/05)

03-06
RSC

DOCUMENT # N04884

1. Corporation Name

INLET SANDS OWNERS ASSOCIATION, INC.

2. Principal Office Address
126 S. WALTON LAKESHORE DR 2

3. Mailing Office Address
3221 TURTLE LAKE CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

% MAXIMO BATISTA

City & State
PANAMA CITY FL

City & State
MARIETTA GA

Zip
32413

Country
US

Zip
30067-5018

Country
US

4. Date Incorporated or Qualified
To Do Business in Florida **8/28/1984**

5. FEI Number **59 2746186**

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
JOHN PASCOE

Street Address (P.O. Box Number is Not Acceptable)
162 WHITE SANDY DR

Suite, Apt. #, Etc.

City
PANAMA CITY BEACH

State
FL

Zip Code
32407

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

John B. Pascoe
REGISTERED AGENT MUST SIGN

Date **OCTOBER 24, 2006**

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
PRES	BILL DELONEY	210 Foxworth Court	Dothan, AL. 36305
VP	JOHN PASCOE	162 WHITE SANDY DR	PANAMA CITY BCH FL 32407
SECR	DEBORAH KELLY	6509 Man O War Trail	Tallahassee, FL 32309
TREAS	MÁXIMO BATISTA	3221 TURTLE LAKE CT	MARIETTA GA 30067-5018
MAINT	JOSEPH CHADWICK	42 BROOKHOLLOW CV	JACKSON TN 38305-6475

900081668879
11/08/06--01043--008 **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:

Maximo Batista

MÁXIMO BATISTA

OCTOBER 24, 2006 770.955.1875

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Inlet Sands Homeowners Association Inc.
% Máximo Batista, Treasurer
3221 Turtle Lake Ct
MARIETTA, GA 30067-5018

770.955.1875
TigerMax@BellSouth.Net

October 24, 2006

FLORIDA DIVISION OF CORPORATIONS
Clifton Building
2661 W EXECUTIVE CENTER CIR
TALLAHASSEE FL 32301-5020

20/2

Ref: Document # N04884 – Inlet Sands Homeowners Association

Greetings,

We are enclosing a reinstatement application for the above nonprofit corporation, which we are just learning had lapsed some years ago.

As I explained in our phone conversation, the board was unaware of this lapse, which must have been due to a change of name and address of our treasurer at that time. This was totally unintentional and we regret the occurrence.

Based on this circumstance, we beg of your office to waive the penalty that we have been informed would normally apply. Per our conversation, a check in the amount of \$245.00 is enclosed to cover the required fees for this reinstatement.

We will appreciate receiving the appropriate communication indicating that the reinstatement has been approved, along with instructions for our proper compliance in the future.

We thank you in advance for your kind attention.


Máximo Batista, Treasurer
INLET SANDS HOMEOWNERS ASSOCIATION, INC.

We did not receive the annual Report
notice in 2003.

ASB