

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1092

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 SEP 23 AM 8:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N09198

1. Corporation Name

Poplar Ridge Homeowner's Association, Inc

REINSTATEMENT 00-05

2. Principal Office Address

1102 Poplar Dr

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Tallahassee FL

City & State

Zip

32304

Country

Leon

Zip

Country

CR2E081 (8/05)
~~105000043589~~

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-2965631

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

Tabatha Rackley

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

1102 Poplar Dr

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32304

000060086840

09/28/05-01053-021-***367 50

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

Tabatha Rackley

REGISTERED AGENT MUST SIGN

Date Sept 10, 2005

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	Drew Grimes	1124 Dove Hollow	Tallahassee FL 32304
S	Teresa McKenzie	1108 Poplar Dr	Tallahassee FL 32304
T	Tabatha Rackley	1102 Poplar Dr	Tallahassee FL 32304

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:

Tabatha Rackley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sept 10, 2005

Date

Daytime Phone #

292

September 22, 2005

Poplar Ridge Homeowner's Association, Inc
1102 Poplar Drive
Tallahassee, FL 32304

To Whom It May Concern:

I am writing regarding reference number N09198, dated September 20, 2005. To the best of my knowledge Irene Ezell has not received renewal notices for reinstatement fees from the year 2000 to the current date. If you have any further questions or concerns you may contact me at (850)576-0465. Thank you for your time.

Sincerely,

A handwritten signature in black ink, appearing to read "Tabatha Rackley". The signature is fluid and cursive, with a large loop at the end of the last name.

Tabatha Rackley