

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



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

FILED
 01 OCT 26 PM 1:22
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **N 10435**

1. Corporation Name
Endless Summer Owners Association, Inc.

2. Principal Office Address 17614 Front Beach Rd		3. Mailing Office Address 17614 Front Beach Rd	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Panama City Beach FL		City & State Panama City Beach FL	
Zip 32413	Country USA	Zip 32413	Country USA

REINSTATEMENT

4. Date Incorporated or Qualified To Do Business in Florida
7/26/85

5. FEI Number
59-2616259

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

2001

7. Name and Address of Current Registered Agent

Name **Brian Hess**

Street Address (P.O. Box Number is Not Acceptable)
9108 Front Beach Rd.

Suite, Apt. #, Etc.

City **Panama City Beach**

State **FL** Zip Code **32408**

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 **Brian D Hess** Date **10/19/01**

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
Pres/CEO	Earl Jernigan	Wallace College Rt 6 Box 62	Dothan, AL 36303
V Pres	D.A. Scarborough	PO Box 1329	Alexander City AL 35011
D	Bob Bridgewater	2626 Cheyenne Dr	Bowling Green, KY 42104
D	Glenn Joiner	2235 New County Line Rd	Sylacauga, AL 35150
Sec/D	Milton Findley	1393 Bembrookelane	Acworth, GA 30101
D	Monte Ellis	8014 Randall Rd.	Huntsville AL 32413

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: **Earl Jernigan, President** Date **10-19-01** Daytime Phone # **(334) 983-3521 ext 376**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (9/00)