APPLICATION FOR REINSTATEMENT

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

FILED
99 JAN 28 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(1)

DOCUMENT # N14565

1. Corporation Name
LAKE KIRKLAND SHORES SUBDIVISION HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~Main at Cherry~~	~~P.O. Box 57~~
~~Groveland, FL 34736~~	~~Groveland, FL 34736~~

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

REINSTATEMENT 9599

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
6702 Lake Kirkland Dr.	6702 Lake Kirkland Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Clermont, FL 34711	City & State: Clermont, FL 34711
Zip: 34711 Country: Lake	Zip: 34711 Country: Lake

4. Date Incorporated or Qualified To Do Business in Florida: 4/24/86

5. FEI Number: 21-0168933 ☐ 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P/D	George Butzin	6626 Lake Kirkland Dr.	Clermont, FL 34711
S/D	Cora H. Simon	6702 Lake Kirkland Dr.	Clermont, FL 34711
T/D	Vicki Butzin	6626 Lake Kirkland Dr.	Clermont, FL 34711

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8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
Arthur E. Roberts Main at Cherry Groveland, FL 34736	Name: James K. Simon Street Address (P.O. Box Number is Not Acceptable): 6702 Lake Kirkland Drive Suite, Apt. #, Etc. City: Clermont, FL State: FL Zip Code: 34711

CR2E040 (1/98)

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 _____ REGISTERED AGENT MUST SIGN Date 1/14/99

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: Cora H. Simon 1/14/99 352-242-4358
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Cora H. Simon, Secretary/Director

CSC THE UNITED STATES CORPORATION COMPANY

(2)

ACCOUNT NO. : 072100000032

REFERENCE : 116026 7170239

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : ~~$ 1358.75~~ 490.00

ORDER DATE : January 28, 1999

ORDER TIME : 2:25 PM

ORDER NO. : 116026-005

CUSTOMER NO: 7170239

CUSTOMER: Linda Topping, Paralegal
Richard H. Langley
700 Almond Street

Clermont, FL 34712

DOMESTIC FILINGS

NAME: LAKE KIRKLAND SHORES SUBDIVISION HOMEOWNERS' ASSOCIATION, INC.

XX___ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
XX_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

EXAMINER'S INITIALS _____

99 JAN 29 PM 3:12

DIVISION OF CORPORATION