PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

AMENDED APPLICATION FOR REINSTATEMENT

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

FILED
1997 DEC 23 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N14869

1. Corporation Name
O.N.C. INDUSTRIAL CENTER CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
6691-A 33rd St. East
Sarasota, FL 34243

Mailing Address
6691-A 33rd St. East
Sarasota, FL 34243

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip / Country

3. New Mailing Address, If Applicable
6691-A 33rd St. EAst
Suite, Apt. #, etc.
City & State
Sarasota, FL 34243
Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida
May 12, 1986

5. FEI Number
☐ 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	Kathie A. Diaz - D	6691-A 33rd St. EAst	Sarasota, FL 34243
VP/D	Charlene Lenger - D	700 Indian Beach Circle	Sarasota, FL 34234
S/D	Charlene Lenger - D	700 Indian Beach Circle	Sarasota, FL 34234
T/D	Kathie A. Diaz - D	6691-A 33rd St. EAst	Sarasota, FL 34243
Dir.	Edward L. Kalin - D	5252 S. Tamiami Trail	Sarasota, FL 34231

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8. Name and Address of Current Registered Agent
John Olliver
2477 Stickney Point Road
Suite 117-B
Sarasota, FL 33581

9. Name and Address of New Registered Agent
Name: Kathie A. Diaz
Street Address (P.O. Box Number is Not Acceptable): 6691-A 33rd St. East
Suite, Apt. #, Etc.
City: Sarasota
State: FL
Zip Code: 34243

CR2E040 (12/95)

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: Kathie A. Diaz — REGISTERED AGENT MUST SIGN
Date: 11/29/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

KATHIE A. DIAZ

SIGNATURE: Kathie A. Diaz — 11/29/97 — (941) 756-7252

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #