PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
[illegible] Secretary of State
DIVISION OF CORPORATIONS

98-99 AR

FILED
99 JUN 16 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N15520

1. Corporation Name

Embassy Plaza Condominium Association, Inc.

Principal Place of Business	Mailing Address
13839 U.S. Highway 98 Bypass Dade City, Florida 33525	

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

REINSTATEMENT 98-99 AR

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 6/19/1986

5. FEI Number: 59-2712553 ☐ 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/D	Stephen P. Smith	13839 U.S. Hwy 98 Bypass	Dade City, FL 33525
S/D	Hjalma E. Johnson	13825 U.S. Hwy 98 Bypass	Dade City, FL 33525
T/D	Kevin T. Roberts	13924 7th Street	Dade City, FL 33525

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****297.50 ****297.50

8. Name and Address of Current Registered Agent

James E. Vest
13811 U. S. Highway 98 Bypass
Dade City, Florida 33525

9. Name and Address of New Registered Agent

Name: Joe A. McClain
Street Address (P.O. Box Number is Not Acceptable): 37908 Church Avenue
Suite, Apt. #, Etc.:
City: Dade City | State: FL | Zip Code: 33525

CR2E081 (12/98)

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: [signature] REGISTERED AGENT MUST SIGN

Date: 6.14.99

11. This corporation owes 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.

6-14-99

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-14-99
Date

(352) 567-2933
Daytime Phone #

Stephen P. Smith, President