2. Principal Office Address

Suite, Apt. #, etc.



LORID DEPARTMENT OF CLATE

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Jecutary Serie

3152

DOCUMENT # N26188

1811 E. SANAPOINTE Place

William B. ROMAN

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath

SANDPOINTE PROPERTY OWNERS ASSOCIATION INC.

3. Mailing Office Address

Suite, Apt. #, etc.

P.O. Box

FILED

00 NOV -3 PM 2: 00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

4. Date Incorporated or Qualified

1806 E. SANdpointe Place Vero Beach, FL 32963

Oct. 30, 2000 (561)231

KE

City 9 State							less in Fiorida 4/29/88			
Vero Beach, FL			Vero Beach, FL		5. FEI Number 65-0259568			4	Applied For	
Zip 329	63	Country Indian River	Zip 32964	Country INDIAN RIVER	6.	-	S8.75		nal Fee required cate of Status	
7. Name and Address of Current Registered Agent										
	Name John J. Burns Street Address (R.O. Roy Number is Not Acceptable) 1 / 0/ ********************************									
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Place  ***********************************										
Suite, Apt. #, Etc.										
	City	Vero 1	Beach			State FL	Zip Code 3 296	3		
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  REGISTERED AGENT MUST SIGN  Date  Date										
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	e / Zip		
PD	Jol	HNJBURNS	181	I E. SAND JOINT	e Place	Ver	Beach,	FL	32963	
vir D	MAR	K ThuRN	163	SANdpointe:	Drive	Ver	o Beach,	F L	3 2963	
# D	C HR	IS TOMPKINS	/800	E. SANd poiNT	te Place	Ver	Beach,	FL 3	32963	
D	Ed	BARKHORN	41 1	W. SANdpointe	Place.	Ver	BeAch, F	L 3=	2463	

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 filling 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

Post Office Box 3152 . Vero Beach, Florida 32964

October 31, 2000

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, Florida 32314

Att:

Katherine Harris

Secretary of State

Re:

Sandpointe East Homeowners Association

Dear Ms. Harris:

We are asking for a one-time exclusion due to an oversight by our former secretary/treasurer who failed to file the report by the May 1 deadline. For some reason there was an incorrect address on the report and the second request for the report was not received. This was definitely a clerical oversight and not a lack of diligence on the association's part. Furthermore, procedures have been put in place to insure this will not happen in the future.

Thank you for your consideration in this matter.

Sincerely,

Christopher P. Tompkins

Secretary/Treasurer