

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
FILED

02 OCT 16 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N26646

1. Corporation Name

**WEST ORANGE COMMUNITY DEVELOPMENT
CORPORATION**

2. Principal Office Address

830 Klondike Street

Suite, Apt. #, etc.

City & State

Winter Garden, Florida

Zip

34787

Country

US

3. Mailing Office Address

1089 N. Circle Court

Suite, Apt. #, etc.

City & State

Winter Garden, Florida

Zip

34787

Country

US

REINSTATEMENT 1997-2002

**4. Date Incorporated or Qualified
To Do Business in Florida**

05/26/1988

5. FEI Number

59-2932125

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

☒ **\$8.75 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name

Dixon, Mildred L.

Street Address (P.O. Box Number is Not Acceptable)

1089 N. Circle Court

Suite, Apt. #, Etc.

City

Winter Garden

State

FL

Zip Code

34787

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

Mildred L. Dixon
REGISTERED AGENT MUST SIGN

Date **October 2, 2002**

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
P/D	Dixon, Mildred L.	1089 N. Circle Court	Winter Garden, Florida 34787
D	Alston, Thomas N.	400 W. Church Street	Orlando, Florida 32801
D	Wilder, Scharlie Mae	1007 Stacki Terrace	Winter Garden, Florida 34787

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:

Mildred L. Dixon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-2-02

Date

Daytime Phone #

CR2E081 (9/01)

McLEOD, McLEOD & McLEOD, P.A.

Attorneys and Counselors at Law

Post Office Drawer 950

Apopka, Florida 32704-0950

Johnie A. McLeod
Raymond A. McLeod
William J. McLeod

48 East Main Street
Telephone: 407-886-3300
Facsimile: 407-886-0087

October 14, 2002

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

RE: WEST ORANGE COMMUNITY DEVELOPMENT CORPORATION

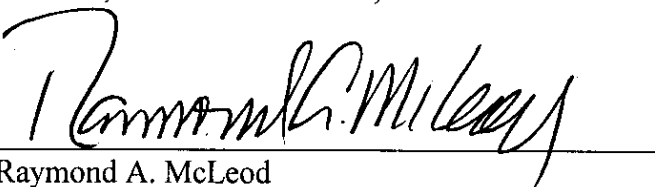
Enclosed please find an original Corporation Reinstatement for the above named Non-Profit Corporation, and this firm's check in the amount of \$665.00 for the following fees:

Reinstatement Fee	\$175.00
Annual Report Fee	\$490.00 (\$61.25 * 8 years)
Certified Copy	<u>\$ 8.75</u>
Total	\$673.75

Please file the Corporation Reinstatement and return a certified copy to me. Thank you for your prompt attention to this matter.

Sincerely,

McLeod, McLeod & McLeod, P.A.



Raymond A. McLeod

RAM/csm
Enclosures
c: Florida Central Railroad