

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM:

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 JUL 30 AM 9: 51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

N27315

1. Corporation Name

Airport Place I Owners Association, Inc.

2. Principal Office Address

1209 Airport Rd. Destin, FL 32541

Suite, Apt. #, etc.

3. Mailing Office Address

526 Bayview St. Destin, FL 32541

Suite, Apt. #, etc.

City & State

Destin, FL

City & State

Destin, FL

Zip

32541

Country

USA

Zip

32541

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 07/08/88

5. FEI Number

59-2925817

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

REINSTATEMENT *00-02*

7. Name and Address of Current Registered Agent

Name

Mary K. Kraemer

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

35 Clayton Lane

Suite, Apt. #, Etc.

City

Santa Rosa Beach

State

FL

Zip Code

32459

500006952835--9
-08/07/02--01058-011
****358.75 ****358.75

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

Mary K. Kraemer
REGISTERED AGENT MUST SIGN

Date

July 25, 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
Pres. <i>for</i>			
Treas.	Bert Young	526 Bayview St.	Destin, FL 32541
Dir.	Stephen Abbott	506 Hwy 98 E.	Destin, FL 32541
Dir.	Chris Wilson	1209 Airport Rd., #3	Destin, FL 32541
Dir.	Joey Mannon	1830 Jack Delozier Dr.	Sevierville, TN 37876

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:

Bert Young
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7/29/02

Daytime Phone #

654-9330
850/267-040

CR2E081 (9/01)