		PLEASE F	READ A	LL INST	RUCTI	ONS	BEFORE C	OMPLET	TING THIS FORM.		
APPLICATION FOR				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary Of State							
REINSTATEMENT					IVISION OF CORPORATIONS			FILED			
DOCUMENT # N29253 1. Corporation Name							99 JUN 25 PM L: 23				
WILLOW CREEK PROPERTY OWNERS' ASSOCIATION, INC.								SECRETARY OF STATE TALLAHASSEE. FLORIDA			
Principal Pi	ace of Busin	1688		Mailing Address				: 			
987 PONDELLA RO N. FT. MYERS FL 33903 US				P.O. BOX 3712 FT MYERS FL 33918 US							
		e incorrect in any v		ough incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable				Date Incorporated or Qualified			
Suite, Apl. #, etc.				Suite, Apt. #, etc.				To Do Business in Florida 11/14/1988 5. FEI Number Applied For			
City & State				City & State				5. FEI NUMD	65-0130547	Applied For Not Applicable	
Zip Country			Zip Country				6. CERTIFICATE OF STATUS DESIRED 58 75 Additional Fee required for a Certificate of Status				
7. Names a	and Street A			Director (Florida nonprofit corporations must list at lea			tions must list at lea				
Tittle(s)	Name of Officers and/or Directors				Officer and/or Director 3 (Do NOT Use Post Office Box No			City / State / Zip			
PD CHITWOOD, J MATTEW SCHILLER, LARRY CHARRY				19791 FERN TRE DR 13490 RED MAPLE CA				አ	N. FT. MYERS FL		
VPD	VPD SHEPERD, CLARENCE CO UNTISS, CRAIG				1947+ RD MAPLE CIR 13420 RED MAPLE CIR				N FT MYERS FL		
STD DOHERTY, NANCI				13881 FERN TRL DR				N FT MYERS FL			
D	D DUMONT, MERIAM Angeld, Albert 6.				19891 WILLOW BRIDGE DR 1384/ いにいい おたからも 2			N FT MYERS FL			
D	D PRUEGER, DARAH. BRAWSCUM, OBJE . E. COB				13000 WILLOW BRIDGE BR 13701 FEAN TRAIL DR.				N FT. MYERS FL		
									90002325523-6 -07/07/9301073017 ****245.00 ****245.00		
									Address of New Registered A	gent TS	
ECKERTY, THOMAS G ESQ.				REINST			Street Address (F	O. Box Number	er is Not Acceptable)	•	
12734 KENWOOD LANE STE. 89							Sulte, Apt. #, Etc.		000008888888		
FORT MEERS FL 33907					City			*****61.25			
10. I, being appointed the registered agent of the serve hame corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent Registered Registered Agent Registered Register											
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No No 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 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 dwed 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: NAME OF BROWING OF FICER OR DIRECTOR Date Dayling Phone #											