

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED

98 APR -9 PM 2:07

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # N29591

1. Corporation Name

Gateway Center Owners Association, Inc.  
 c/o David R. Langfitt, Sr.  
 65 Royal Palm Blvd., Suite B, Vero Beach, FL 32962

Principal Place of Business

Mailing Address

c/o David R. Langfitt, Sr.  
 65 Royal Palm Blvd., Suite B  
 Vero Beach, FL 32960

400002485444--6  
 -04/10/98--01103--007  
 \*\*\*\*673.75 \*\*\*\*673.75

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

12/07/88

65 Royal Palm Blvd.

Suite, Apt. #, etc.

5. FEI Number

Applied For

Suite B

City & State

59-2269864

Not Applicable

City & State

Vero Beach, FL

Zip

Country

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

32960

Indian River

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
D	David R. Langfitt, Sr.	65 Royal Palm Blvd. #B	Vero Beach, FL 32960
D	Calvin Cox	3335 Ocean Drive	Vero Beach, FL 32960
D	Sherman Smith III	1717 Indian River Blvd.	Vero Beach, FL 32960

REINSTATEMENT 91-980  
 7/8  
 4/9/98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

David R. Langfitt, Sr.  
 65 Royal Palm Blvd., Suite B  
 Vero Beach, FL 32960

Name

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

Suite, Apt. #, Etc.

City

State  
 FL

Zip Code

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

David R. Langfitt Sr. Trustee

REGISTERED AGENT MUST SIGN

Date

4/6/98

11. This corporation owes or has paid 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.

SIGNATURE:

David R. Langfitt Sr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/6/98

Daytime Phone #

CR2E040 (1/98)