

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

**CORPORATION
REINSTATEMENT**



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

02 AUG 14 PM 12:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N35849

1. Corporation Name

Oak Hill Plantation Property Owner's Association

300007169583--4
-08/16/02--01056--003
*****665.00 *****665.00

2. Principal Office Address

106 Hatley Street Southeast

3. Mailing Office Address

P. O. Box 191

Suite, Apt. #, etc.

N/A

Suite, Apt. #, etc.

N/A

City & State

Jasper, Florida

City & State

Jasper, Florida

Zip

32052

Country

USA

Zip

32052

Country

USA

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

12/21/1989

5. FEI Number

59305481

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 95-02

7. Name and Address of Current Registered Agent

Name

Ronald H. Ratliff

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

14859 Southeast County Road 137

Suite, Apt. #, Etc.

Not Applicable

City

Jasper

State

FL

Zip Code

32052

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 08/12/2002

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	Ronald H. Ratliff	P. O. Box 191	Jasper, FL 32052
VP/D	James M. Moody	P. O. Box 191	Jasper, FL 32052
S/D	Vickie L. Ratliff	14859 S.E. County Road 137 XXXXXXXXXX	Jasper, FL 32052

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:

[Signature]

(Ronald H. Ratliff)

08/12/02

386-792-8484

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/01)

7/8/14/02