

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 Sandra B. Northam
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 99 JUN -7 AM 11:11
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # N36042
 1. Corporation Name
 WALMWOOD HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address
 3637 Berger Rd. 3637 Berger Rd.
 Lutz, Fl 33549 Lutz, Fl 33549

If above data is incorrect in any way, line through incorrect information and enter corrected below.
 2. New Principal Office Address, if Applicable
 3. New Mailing Office Address, if Applicable
 Suite, Apt. P.O. No. Suite, APT. #, ETC.
 City & State City & State
 Zip Country Zip Country
 4005 N. Cork Rd.
 Plant City, Fl
 33565

REINSTATEMENT
 4. Date Incorporated or Qualified To Do Business in Florida 1/05/90
 5. FE Number Applied For Not Applicable
 CERTIFICATE OF STATUS DESIRED

7. Name and Street Addresses of Each Officer and/or Director. (Florida corporation corporations must list at least 3 directors)

FE# (S)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Box Office Box Numbers)	City / State / Zip
D/P	Richard Catlett	4005 N. Cork Rd.	Plant City, Fl 33565
STD	Loren J. Bartels, M.D.	2504 High Oak Lane	Lutz, Fl 33549
D	Linda R. Bartels	2504 High Oak Lane	Lutz, Fl 33549
D	Tim Woods	12501 Forest Hills Dr.	Tampa, Fl 33612

8. Name and Address of Current Registered Agent
 Richard R. Catlett
 4005 North Cork Road
 Plant City, Fl 33565

9. Name and Address of Non-Registered Agent
 Name (same - no change)
 Street Address (P.O. Box Number is Not Acceptable)
 Suite, Apt. #, ETC.
 City Zip Code

10. I, being a natural person, am familiar with and accept the obligations of Section 607.0505.
 Signature of Registered Agent: Richard R. Catlett
 REGISTERED AGENT MUST SIGN Date: 6-1-99

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No n/a (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)(x), 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: Richard Catlett
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Richard Catlett, President

Date: 6-1-99
 Division: 1521158