PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
99 JUL 17 AM 8:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N38289

1. Corporation Name
Tealbrooke Professional Park Property Owners Asscciation, Inc.

Principal Place of Business	Mailing Address
925 SW 17th Street Ocala, Fl. 34471	See Change below

REINSTATEMENT 96-99

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
2403 SE 17th Street	2403 SE 17th Street
Suite, Apt. #, etc. Suite 101	Suite, Apt. #, etc. Suite 101
City & State Ocala, FL	City & State Ocala, FL
Zip: 34471 Country: USA	Zip: 34471 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 05/21/1990

5. FEI Number: 59-2880941 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D Pres.	Henry A. Ehlers	2403 SE 17th St., Ste. 101	Ocala. FL 34471
Dir.	Gary Thurston	2405 SE 17th St., Ste. 301	Ocala, FL 34471
Dir.	Frank Vero	2300 SE 17th Street	Ocala, FL 34471

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****428.75 ****428.75

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
Gus Galloway P.O. Box 113 Ocala, FL 34478	Name: Henry A. Ehlers Street Address (P.O. Box Number is Not Acceptable): 2403 SE 17th Street, Suite, Apt. #, Etc.: Suite 101 City: Ocala State: FL Zip Code: 34471

CR2E081 (12/98)

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: Henry A. Ehlers — REGISTERED AGENT MUST SIGN — Date: 7-23-99

11. This corporation owes 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: Henry A. Ehlers — 7-23-99 — (352) 351-3611
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
HENRY A. EHLERS