

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1/2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
Dec 21, 2005 8:00 A.M.
Secretary of State

DOCUMENT # N38317

1. Corporation Name

Blackwater Heritage Trail, Inc.

W05-53890

2. Principal Office Address

P.O. Box 4292

Suite, Apt. #, etc.

City & State

Milton, FL

Zip
32572

Country
USA

3. Mailing Office Address

P.O. Box 4292

Suite, Apt. #, etc.

City & State

Milton, FL

Zip
32572

Country
USA

REINSTATEMENT
CR2E081 (8/05)

04-05

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

5/17/1990

5. FEI Number

59-3027002

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$9.75 Additional Fee Required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

J. Paul Fitzgerald

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

6839 Caroline Street

900061966055

Suite, Apt. #, Etc.

City

Milton

State
FL

Zip Code
32570

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

REGISTERED AGENT MUST SIGN

Date

Dec 18, 05

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
PD	Mack Thetford	5329 Conecuh St	Milton, FL 32570
TR	John Ducker	6825 Oak St.	Milton, FL 32570
SEC	Mike Wolfe	15501 Munson Hwy	Milton, FL 32570

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:

Mack Thetford
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

29 Nov. 2005

Date

850-292-2557

Daytime Phone #

12/21/05



Jeb Bush
Governor

Department of Environmental Protection

Marjory Stoneman Douglas Building
3900 Commonwealth Boulevard
Tallahassee, Florida 32399-3000

Colleen M. Castille
Secretary

December 6, 2005

Ms. Cathy Stauffer
Division of Corporations
Florida Department of State
Post Office Box 6327
Tallahassee, Florida 32314

Re: Document Number N38317

Dear Ms. Stauffer:

Enclosed is a Corporation Reinstatement application for Blackwater Heritage Trail, Inc., a duly authorized citizen support organization under contract to provide support for the Office of Greenways and Trails in accordance with Section 20.2551, F.S.

Please let me know if anything further is needed. I can be reached at 245-2050 or you can e-mail me at marsha.rickman@dep.state.fl.us. Your assistance is greatly appreciated.

Sincerely,

Marsha Rickman
Office of Greenways and Trails

Enclosure

/mr