

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 DEC 28 AM 8:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # N40245**

1. Corporation Name

Wedgewood Villas Of Duval County  
Owners Association, Inc.

Principal Place of Business

Mailing Address

562 Staffordshire Dr. E.  
Jacksonville, Florida

(Same)

300002730623--9  
-01/05/98--01058--003  
\*\*\*\*\*420.00 \*\*\*\*\*420.00

**REINSTATEMENT 95-98**

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

10/08/1990

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

58-1959729

Not Applicable

City & State

City & State

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

Zip

Country

Zip

Country

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

| Title(s)<br>1 | Name of Officers<br>and/or Directors<br>2 | Street Address of Each<br>Officer and/or Director<br>(Do NOT Use Post Office Box Numbers)<br>3 | City / State / Zip<br>4 |
|---------------|---|--|-------------------------|
| Pres.         | Melissa J. Howell                         | 562 Staffordshire Dr E.  | Jacksonville, FL 32225  |
| V. Pres.      | Mr. Frank McCaskill                       | 590 Staffordshire Dr. E.   | Jacksonville, FL. 32225 |
| Tres.         | Mr. Harold Donaghe                        | 568 Staffordshire Dr.  | Jacksonville, FL. 32225 |
| Sec.          | Mrs. Mary Donaghe                         | 568 Staffordshire Dr.  | Jacksonville, FL. 32225 |
| Dir.          | Mr. Sam Bair                              | 572 Staffordshire Dr.  | Jacksonville, FL. 32225 |
| Dir.          | Mr. Norm Michon                           | 632 Staffordshire Dr.  | Jacksonville, FL. 32225 |
| Dir.          | Mr. Tracy Higginbotham                    | 618 Staffordshire Dr. E/   | Jacksonville, FL. 32225 |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

William B. Ryan  
3000-8 Hartley Rd.  
Jacksonville, FL. 32257

Name

Mrs. Melissa J. Howell

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

562 Staffordshire Dr. E.

Suite, Apt. #, Etc.

City

Jacksonville,

State

FL

Zip Code

32225

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

*M. J. Howell*

REGISTERED AGENT MUST SIGN

Date 11/26/98

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

*M. J. Howell*

Melissa J. Howell, Pres.

Date

11/26/98

Daytime Phone #

(904) 221-2027

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CFR040 (1/98)