

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Murnighan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N47322

1. Corporation Name

Suwannee River Riding Club, Inc.

Principal Place of Business

Route 2 Box 671
Branford, Florida 32008

Mailing Address

W98-6303

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc

City & State

Zip

Country

FILED

99 MAR 23 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-03/30/99--01080--008
*****61.25 *****61.25

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number 593-111-780
710000524307

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PD	Stephen C. Bullock	14502 176th Street	McAlpin, Florida 32062
V-P/D	Sammy Keen	Rt. 2, Box 5668	T. H. White, FL 32038
PD	Eddie Brown	6974 290th Street	Branford, FL 32008
S	Rhonda Johnson	9957 100th Place	Live Oak, FL 32060
D	Michele Starling	12646 185th Road	Live Oak, FL 32060
D	Teresa Bullock	14502 176th St	McAlpin, FL 32062

8. Name and Address of New Registered Agent

Andrew Decker
701 South Ohio Avenue
Live Oak, Florida 32060

Name
Stephen C. Bullock
Street Address (P.O. Box Number is Not Acceptable)
10 North Columbia Street
Suite, Apt. #, Etc
City
Lake City,
State
FL
Zip Code
32055

[Signature]

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

[Signature]
REGISTERED AGENT MUST SIGN

Date Feb 11, 1998

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☐

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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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date March 4, 1998
Daytime Phone # 904 752-3213