

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 SEP 12 PM 6:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *N49882*

1. Corporation Name
Hideaway Woods Owners Assn Inc.

2. Principal Office Address

9609 Putmore Rd E
Suite, Apt. #, etc.

3. Mailing Office Address

9609 Putmore Rd E
Suite, Apt. #, etc.

City & State

Jacksonville FL
Zip *32257* Country *USA*

City & State

Jacksonville FL
Zip *32257* Country *USA*

4. Date Incorporated or Qualified
To Do Business in Florida

7-15-98

5. FEI Number

59-3147468

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Ron McKinney

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

9609 Putmore Road East

Suite, Apt. #, Etc.

City

Jacksonville

State
FL

Zip Code

32257

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

Ron McKinney

Date *9-13-05*

REGISTERED AGENT MUST SIGN

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
<i>Pres.</i>	<i>Ron McKinney</i>	<i>9609 Putmore Rd E</i>	<i>Jacksonville FL 32257</i>
<i>VP</i>	<i>Vacant</i>		
<i>Sec.</i>	<i>Maree Larson</i>	<i>4013 Moresburg CT</i>	<i>Jacksonville FL 32257</i>
<i>Treas</i>	<i>Sue Mock</i>	<i>9668 Putmore Rd E</i>	<i>Jacksonville FL 32257</i>
<i>At Large</i>	<i>David Waters</i>	<i>9634 Putmore Rd E</i>	<i>" "</i>

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 118.07(3)(l), 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:

Ron McKinney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9-13-05

Daytime Phone #

CR2E081 (01/05)

Hideaway Woods Homeowners Association

September 14, 2005

Ms. Marquitta Williams
Document Specialist
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Document # N49882

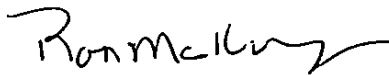
Dear Ms. Williams,

Thank you for your response to my recent letter inquiring about corporate reinstatement for our Hideaway Woods Homeowners Association in Jacksonville. The completed reinstatement form and a check in the amount of \$848.75 are enclosed, along with a copy of your letter as requested. We do not need a certificate of status.

I assume that you send a reminder annually when our corporate annual report form is due. I certainly don't want to ever again find our association in a lapsed status.

I appreciate your assistance.

Sincerely,



Ron McKinney, President
9609 Pritmore Road East
Jacksonville, FL 32257