

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

98A02
REINSTATEMENT



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

APPROVED
 AND
 FILED

98 NOV 18 PM 2:07

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **N95000002139**

1. Corporation Name

LAKE MANN ESTATES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**MOUNT OLIVE A.M.E. CHURCH
 ORLANDO FL 32805**

**3464 DOMI-FITZ CT.
 ORLANDO FL 32805**



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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05/04/1995	
City & State		City & State		5. FEI Number	
Zip		Country		59-3458082	
				Applied For	
				Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DP	SALTER, CHARLIE J	3464 DOMI-FITZ CT.	ORLANDO FL 32805
DVP	WILLIAMS, WILLIE	3367 FITZGERALD DR.	ORLANDO FL 32805
DVP	PATTERSON, ELYARD	3308 CHURCH ST	ORLANDO FL 32805
DS	BALDWIN, INELL	3366 SOUTH STREET	ORLANDO FL 32805
DT	GOODMAN, ERNEST	3400 CHURCH ST	ORLANDO FL 32805
T	JENKINS, IRIS	3209 WALLER PLACE	ORLANDO FL 32805

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**SALTER, CHARLIE J
 3464 DOMI-FITZ CT.
 ORLANDO FL 32805**

Name

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

Suite, Apt. #, Etc.

City

000002694980--0

-11/24/98-01025-010

****61.25 ****61.25

FL

Zip Code

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

Charlie J. Salter

REQUIRED

REGISTERED AGENT MUST SIGN

Date **11/13/98**

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:

Charlie J. Salter
REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/13/98 (407) 293-5449

CR2040 (9/98)

3464 Domi-Fito Court
Orlando, Fl. 32805
November 14, 1998

Dear Sir,

I filed my Association paper before the March deadline. You sent them back to me in May to include the Board of Trustee names. With the original papers I sent a money order for \$61.25. The money order was not returned. Enclosed with this letter I am enclosing another money order for \$61.25. Please check your records for same.

Respectfully yours,
Charles Jean Salter