## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	ÚMEN1	FLORIDA DEPA Secret DIVISION O	ary of St	ate	TATE	FILED  03 MAR 12 AM 8: 55  SECRETARY OF STATE TALLAHASSEE, FLORIDA						
Turning Hawk Ranch Unit 2 Homeowners Association, Inc.												
	Office Addre	lst Place	3. Mailing Office Add	Office Address SE 91st Place						11-1	63	
Suite, Apt. #	#, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.				4. Date Incorporated or Qualified				
City & State	<u>,</u>		City & State	& State				To Do Business in Florida 3/7/1996				
	la, FL		Ocala, FL				5. FEI Number Applied For 6 5 0 7 2 9 6 2 1 Not Applicable					
Zip 3448	Country Zip 34480 USA 3448			Countr	USA CERTIFICATE OF STA				ESIRED	\$8.75 Additional for a Certificate	Fee required	
7. Name and Address of Current Registered Agent												
	Name	George Siebe	•	0000013042940								
	Street Address (P.O. Box Number is Not Acceptable)  1899 SE 91st Place Suite, Apt. #, Etc.							02/24/0301083006 **183.75				
	City	Ocala						2ip Code 4 4 8 0 -	9361	,		
											10/02)	
Signature of Registered Agent Por Port REGISTERED AGENT MUST SIGN								bligations of section 607.0505 or 617.0503, F.S.  Date 2 / 19 / 03				
9. Names	and Street A	ddresses of Each Officer and			ations mu	st list at lea	st 3 directors)					
Titles		Name of Officers and/or Directors		Street Address of Each Officer and/or Director				City / State / Zip				
D	Micha	9039	9039 SE 7th Ave.				Rd. Ocala, FL 34480					
Dη	David	rFuller	9346	5 SE 7		lve.,	Rd.	Ocala	 Fl	34480		
D	Georg	e Siebert	1899	SE 9	) lst	Plac	<u>e</u>	Ocala	, FL	34480		
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 filling 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 prividuals 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.												
SIGNA	SIGNATURE: 2/19/03 (352) 620-3806 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date  Date  Desputing Phone #											

2012

## TURNING HAWK RANCH II HOMEOWNER'S ASSOCIATION

1899 SE 91st Place, Ocala, FL 34480-9361

February 19, 2003

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Corporation Reinstatement

To Whom It May Concern:

I am writing to respectfully ask for reinstatement of a Florida Non Profit Corporation, <u>Turning Hawk Ranch Unit 2 Homeowners Association, Inc.</u> On February 19, 2003, I phoned the "Reinstatement Section" and spoke to one of your representatives, Justin. I explained that I was the Registered Agent and an Officer in this corporation and that in checking my records I could find no indication I had received any notice for renewal of our status as a non profit corporation.

After checking your records, Justin advised me to document this fact, fill out a Corporation Reinstatement form and send a check to the Division of Corporations in the amount of \$183.75. He further advised that this would reestablish our non profit corporation as an active corporation. He closed by informing me if I submitted this information there would be no reinstatement fee assessed. Therefore, I am sending this letter to document I have not received notice of renewal. I have also included an executed copy of a Corporation Reinstatement form, and enclosed a check for \$183.75.

I would like to take this time to thank you for your prompt attention to this matter.

Sincerely,

George Sieberl