

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 OCT 14 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **N96000004377**

1. Corporation Name

**Pablo Woods Homeowners
Association II, Inc.**

2. Principal Office Address

14290 Satinwood Drive

Suite, Apt. #, etc.

City & State

Jacksonville FL

Zip

32224

Country

USA

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

REINSTATEMENT 98-02

**4. Date Incorporated or Qualified
To Do Business in Florida**

8/21/1996

5. FEI Number

59-3413804

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

Michael L. Berry, Jr.

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

333 First Street North, Suite 305

Suite, Apt. #, Etc.

City

Jacksonville Beach

State

FL

Zip Code

32250

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

Michael Berry

REGISTERED AGENT MUST SIGN

Date **01/03/2002**

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
	See attachments.		500008331165--9 -10/11/02--01035--020 ****175.00 ****175.00

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 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:

Steve Berrey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steve Berrey

01/03/2002 (904) 821-7611

Date

Daytime Phone #

Attachment to Corporate Reinstatement Form
Pablo Woods Homeowners Association II, Inc.
Names and Street Addresses of Each Officer and/or Director

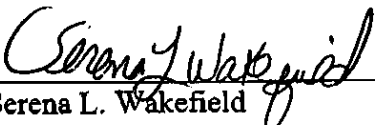
Pos	Name	Address	
D/P	Steve Berrey	14290 Satinwood Dr.	Jacksonville, FL 32224
D/V	Kenneth A. Blackman	3027 Portulaca Ave.	Jacksonville, FL 32224
D/V	Marty Coburn	2926 Farrington St.	Jacksonville, FL 32224
D/S	Gladys Payton	14283 Satinwood Dr.	Jacksonville, FL 32224
D/T	Linda DeWitt	3060 Portulaca Ave.	Jacksonville, FL 32224
D	Corrine DiPilato	14283 Satinwood Dr.	Jacksonville, FL 32224
D	Dorothy Nix	3036 Portulaca Ave.	Jacksonville, FL 32224
D	Steven Maddox	3020 Portulaca Ave.	Jacksonville, FL 32224
D	James Kelley	2941 Farrington St.	Jacksonville, FL 32224
D	Paul Kimbrell	14251 Portulaca Ave. S.	Jacksonville, FL 32224
D	Elizabeth Miller	14251 Pablo Woods Lane	Jacksonville, FL 32224
D	Richard Allen	3145 Pablo Woods Dr.	Jacksonville, FL 32224
D	John Lamb	3026 Farrington St.	Jacksonville, FL 32224

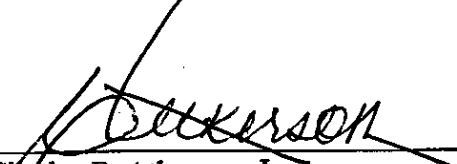
Notice of Resignation
of Corporate Officers and Directors

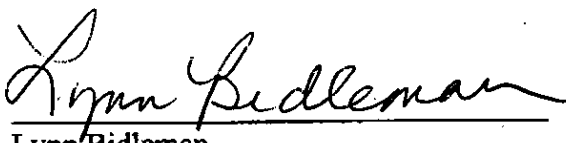
To the Attention of Pablo Woods Homeowners Association II, Inc.:

Please accept this notice that the undersigned hereby resign as directors and officers of Pablo Woods Homeowners Association II, Inc., a Florida not-for-profit corporation which was administratively dissolved by the Florida Department of State on or about October 16, 1998.

Dated: January 3, 2002.


Serena L. Wakefield
President/Director


Charles F. Atkerson, Jr.
Vice President/Director


Lynn Bidleman
Secretary/Treasurer