

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

02 OCT -4 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *N97000005831*

1. Corporation Name

*The Bluffs of Dundee Homeowners
Association*

200008288382--6

-10/09/02--01058--014

***306.25 ***306.25

2. Principal Office Address

310 HWY 542

3. Mailing Office Address

P.O. Box 668

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Dundee, FL

City & State

Dundee, FL

Zip

33838

Country

USA

Zip

33838

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

10/6/97

5. FEI Number

59-3527123

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

Waymon E. Meadows

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

310 HWY 542

Suite, Apt. #, Etc.

City

Dundee

State
FL

Zip Code

33838

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

REGISTERED AGENT MUST SIGN

Date *6/24/02*

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>P</i>	<i>Waymon E. Meadows</i>	<i>404 Ridgewood Ave</i>	<i>Dundee, FL 33838</i>
<i>VP</i>	<i>Julia Meadows</i>	<i>404 Ridgewood Ave</i>	<i>Dundee, FL 33838</i>
<i>S</i>	<i>Kevin Meadows</i>	<i>1402 Bluff Loop</i>	<i>Dundee, FL 33838</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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Waymon E. Meadows

6/24/02 863-439-5542

Date

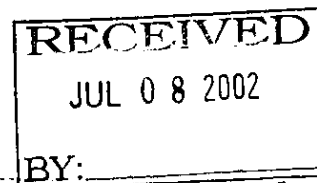
Daytime Phone #

CR2E081 (9/01)



MEADOWS PROPERTIES, INC. □ P.O. BOX 668 □ DUNDEE, FL 33838-0668 □ (863) 439-5542 □ Fax: (863) 439-1517

April 5, 2002



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

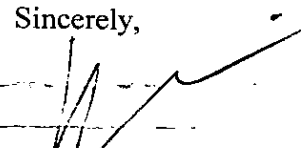
RE: The Bluffs of Dundee Homeowners Association – Document # N97000005831

To Whom It May Concern:

We were unaware that this corporation had been declared "inactive" by the state. After a call to your office we were informed that due to returned mail (it was being mailed to the physical address; instead of the mailing address), it was determined to be inactive. We were informed that the annual fee is \$61.25 for 1998 - 2002, which equals \$306.25. You will find this check enclosed. However, we request that the reinstatement fee be waived, since we never received our mail.

Please return this corporation to active status. Thank you for your cooperation in this matter.

Sincerely,


Waymon E. Meadows, CEO
Meadows Properties, Inc.

WM:gs

Enc.