

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

DOCUMENT # **N97000006079**

1. Corporation Name

**HIGH POINT NEIGHBORS, INC.**

Principal Place of Business

5764 157TH AVE NORTH  
CLEARWATER FL 33760

Mailing Address

5764 157TH AVE NORTH  
CLEARWATER FL 33760

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<br>To Do Business in Florida  | 10/28/1997     |
| Suite, Apt. #, etc.                            | Suite, Apt. #, etc.                          | 5. FEI Number   | Applied For    |
| City & State                                   | City & State                                 | 59-3497801  | Not Applicable |
| Zip  | Country                                      | 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required<br>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)

| Title(s)<br>1 | Name of Officers<br>and/or Directors<br>2 | Street Address of Each<br>Officer and/or Director<br>3 | City / State / Zip<br>4                     |
|---------------|---|--|---|
| PD            | EUGENE E PETYS                            | 5764 157TH AVE N                                       | CLEARWATER FL 33760                         |
| TD            | MICHELE BISHOP PETYS                      | 5764 157TH AVE N                                       | CLEARWATER FL 33760                         |
| SD            | NANCY WILLIS                              | 15436 MORGAN ST  | CLEARWATER FL 33760                         |
| VD            | RAMNATH, MODAN MOHAN                      | 5764 157TH AVE N                                       | CLEARWATER FL 33760                         |
|               |   |  | 200024334052<br>10/31/03--01056-015 #206.25 |

8. Name and Address of Current Registered Agent

PETYS, MICHELE B  
5764 157TH AVE NORTH  
CLEARWATER FL 33760

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State  
**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. or 617.0505, F.S.

Signature of  
Registered Agent

**SIGNATURE REQUIRED**  
REGISTERED AGENT MUST SIGN

Date

**10-20-03**

11. 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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (7/03)