

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUL 28 AM 8:23

DOCUMENT # N98000002092

1. Corporation Name
Village By the Sea Homeowners Association, Inc.

2. Principal Office Address
317 Clarkson Road

3. Mailing Office Address
317 Clarkson Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

103

103

City & State

City & State

Ellisville, MO

Ellisville, MO

Zip

Country

Zip

Country

63011-2271

USA

63011-2271

USA

4. Date Incorporated or Qualified
To Do Business in Florida 04-10-98

5. FEI Number
43-1882318

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 99-00

7. Name and Address of Current Registered Agent

Name

Richard A. Collman

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

1648 Periwinkle Way

Suite, Apt. #, Etc.

Suite B

City

Sanibel

State

FL

Zip Code

33957

300003350363-9
-08/09/00--01015--009
****306.25 ****306.25

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

Richard A. Collman
REGISTERED AGENT MUST SIGN

Date

April 25, 2000

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
D	Dan Stegmann	317 Clarkson Rd, Suite 103	Ellisville, MO 63011-2271
D	John Winston	317 Clarkson Rd, Suite 103	Ellisville, MO 63011-2271
D	Harold E. Miller, Jr.	260 Clarkson Rd, Suite 103	Ellisville, MO 63011-2271

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)(l), 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:

H.E. Miller, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/00

Date

941-395-3974

Daytime Phone #

CR2E081 (9/99)