

H03000211814 6

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 JUN 11 12:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000002362

1. Corporation Name

Ocean Walk Village Alliance, Inc.

2. Principal Office Address

100 N. Atlantic Ave.

Suite, Apt. #, etc.

City & State

Daytona Beach, FL

Zip

32118

Country

U.S.

3. Mailing Office Address

P.O. Box 2491

Suite, Apt. #, etc.

City & State

Daytona Beach, FL

Zip

32115-2491

Country

U.S.

4. Date Incorporated or Qualified To Do Business in Florida

April 23, 1998

5. FEI Number

59-3576698

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$5.75 Additional Fee Required for a Certificate of Status

99-03

7. Name and Address of Current Registered Agent

Name

Palmetto Charter Services, Inc.

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

150 Magnolia Avenue

Suite, Apt. #, Etc.

City

Daytona Beach

State
FL

Zip Code
32114

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0603, F.S.

Signature of Registered Agent

[Handwritten Signature]
REGISTERED AGENT MUST SIGN

Date

6/11/03

9. Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D/P	Rick Hamilton	c/o Ocean Center, 101 N. Atlantic Ave.	Daytona Beach, FL 32118
D/VP	George Karamitos	c/o Ocean Walk, 635 N. Atlantic Ave.	Daytona Beach, FL 32118
D/S/T	Angela Cameron	c/o Adam's Mark, 100 N. Atlantic Ave.	Daytona Beach, FL 32118

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:

[Handwritten Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/11/03

Daytime Phone #

(306) 254-8200

Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

OCEAN WALK VILLAGE ALLIANCE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$481.25