PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State DIVISION OF CORPORATIONS

•		
DOCUMENT	# N980	000005205

1. Corporation Name

NORTH ORANGE ESTATES HOMEOWNERS ASSOCIATION, INC.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2. Principal Office Address 323 10th Avenue West Suite, Apt. #, etc. Suite 103		3. Mailing Office	Address	12/05/02mi	12/05/0201047005 **61.25		
		323 10th	Avenue West		000 AADI'E'T		
		Suite, Apt. #, etc.	~ - -	4. Date Incorporated or Qualified To Do Business in Florida 9/11/98			
		Suite 103					
City & State Palmetto, FL Zip Country 34221 USA		City & State Palmetto,	FI. '.				
			11 37	5. FEI Number	Applied For		
		Zip 34221			RED S8.75 Additional Fee requirements for a Certificate of Statu		
			7. Name	and Address of Current Re	gistered Agent		
	Name	Blalock, Lan	ders, Walters	& Vogler, P.A.			
1	Street Ad	dress (P.O. Box Numbe 302 11th Str	r is Not Acceptable)				
	Suite, Apr	#, Etc.	<u> </u>	··h.			
	City]	Bradenton,			1 — 1 ·	p Code 34205	

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Com (Walt Signature of Registered Agent

November /3, 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	
PTD	David P. Lewis	323 10th Avenue West, Ste. 103	Palmetto, FL 34221	
VSD	Barbara Lewis	323 10th Avenue West, Ste 103	Palmetto, FL 34221	
D	Mary A. Lewis	323 10th Avenue West, Stell 103	Palmetto, FL 34221	
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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 filling 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

David P. Lewis

11-13-02 941-729-8188

DAVID P. LEWIS 323 10th Avenue West, #103 Palmetto, FL 34221

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

Re:

North Orange Estates Homeowners Association, Inc.

Reinstatement

To Whom it May Concern:

Please be advised that my office did not receive the Annual Report form for this corporation for the year 2002. It appears to have been sent to an address in Sarasota and not my current office address. I am an officer and director in a number of corporations in the State of Florida and this is the only one for which the Annual Report was not filed for year 2002.

I therefore respectfully request that the reinstatement fee of \$175.00 be waived. I am enclosing the Reinstatement form and the Annual Report fee of \$61.25 for the year 2002. Thank you for your kind consideration in this matter.

Sincerely,

David P. Lewis

President and Director of

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North Orange Homeowners Association, Inc.