

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 03 MAR 11 AM 9:50

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N99000001002

1. Corporation Name
Diamond Ridge Homeowners Association, Inc.

REINSTATEMENT 01-03

2. Principal Office Address 522 Highway 92		3. Mailing Office Address PO Box 1373	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Auburndale, FL		City & State Auburndale, FL	
Zip 33823	Country USA	Zip 33823	Country USA

EP
05/9/01 / 90006 026-41.25

4. Date Incorporated, or Qualified To Do Business in Florida		1999
5. FEI Number 59-3577046	Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name Teresa Jernigan	
Street Address (P.O. Box Number is Not Acceptable) 412 Diamond Ridge Drive 800013911118	
Suite, Apt. #, Etc. 03/11/03--01019--013 **393.75	
City Auburndale	State / Zip Code FL 33823

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 Teresa Jernigan Treasurer Date 3/4/03
REGISTERED AGENT MUST SIGN

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
Pres <i>10</i>	Lee Goss	137 Diamond Ridge Blvd	Auburndale, FL 33823
VP <i>10</i>	David Arnett	118 Diamond Ridge Blvd	Auburndale, FL 33823
Treas <i>10</i>	Teresa Jernigan	412 Diamond Ridge Drive	Auburndale, FL 33823
D	James C. Spivey	522 Highway 92	Auburndale, FL 33823

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: Teresa Jernigan Treasurer 3/4/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (10/02)