

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *page 1 of 2*

APPLICATION  
FOR



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

FILED

00 OCT 26 PM 2:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N99000001660**

1. Corporation Name

**MILL CREEK PROPERTY OWNER'S ASSOCIATION, INC.**

Principal Place of Business

1507 25TH AVENUE  
VERO BEACH FL 32980

Mailing Address

1507 25TH AVENUE  
VERO BEACH FL 32980

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

*205 39th Ct Vero Beach*  
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

*205 39th Ct*  
Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

03/11/1999

5. FEI Number

*65-0953691*

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$6.75 Additional Fee required  
for a Certificate of Status

City & State

*Vero Beach FL*

City & State

*Vero Beach FL*

Zip

*32968*

Country

Zip

*32968*

Country

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

*04-03-00 90002 005 #6125*

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
DP	BRACKETT, MARK A	1507 25TH AVE.	VERO BEACH FL 32980
DT	BRACKETT, KELLY	1507 25TH AVE.	VERO BEACH FL 32980
SDV	TERRY, RICK	408 12TH PLACE S.E.	VERO BEACH FL
DP	Shannon Brackett	<i>205 39th Ct</i>	<i>Vero Beach, FL 32968</i>
DT	Chris Pensch	<i>255 39th Ct.</i>	<i>Vero Beach, FL 32968</i>
D	Dave Dogerfield	<i>285 39th Ct</i>	<i>Vero Beach, FL 32968</i>

8. Name and Address of Current Registered Agent

BRACKETT, MARK A  
1507 25TH AVENUE  
VERO BEACH FL 32980

9. Name and Address of New Registered Agent

Name *Shannon Brackett*  
Street Address (P.O. Box Number is Not Acceptable)  
*205 39th Ct*  
Suite, Apt. #, Etc.

City *Vero Beach*

State  
**FL**

Zip Code  
*32968*

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.

Signature of  
Registered Agent

*Shannon Brackett*  
REGISTERED AGENT MUST SIGN

Date *10/16/2000*

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:

*Shannon Brackett*

*Shannon Brackett*

Date *10/16/00*

(561) 562-9462  
Daytime Phone #

Mill Creek P.O.A.

203 39th Court  
Vero Beach, Florida 32968

Phone (361)562-9462  
Fax (361)562-9014

FBI : 65-0953691

November 8, 2000

Dear Tyrone:

I apologize in advance if I have speeled your name incorrectly. Thank you for your help. Per our conversation, I am writing this letter.

I mailed in the State report in a timely fashion with no response of corrections needing to be made. I recieved an application for reinstatement from the former Association president early October. It was mailed to his address. It was not clear to me as the reason for this application. I made a copy of the cashed check in the amount of \$81.25, that was cashed on March 31, 2000. With this information would you please waive the reinstatement fee.

Please let me know if there is anythin further I need to do.

Sincerely,

  
Shannon Brackett

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