


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 05 SEP 30 PM 5:11 SECRET TALLAHASSEE, FLORIDA	
DOCUMENT # <u>P940000 44445</u>					
1. Corporation Name <u>Southern Approaches Property Owners Association I, Inc</u>					
2. Principal Office Address <u>2409 SW Sisters Welcome Rd</u> Suite, Apt. #, etc. <u>Suite 101</u> City & State <u>Lake City FL</u> Zip <u>32025</u> Country <u>US</u>			3. Mailing Office Address <u>2409 SW Sisters Welcome Rd</u> Suite, Apt. #, etc. <u>Suite 101</u> City & State <u>Lake City, FL</u> Zip <u>32025</u> Country <u>US</u>		
			4. Date Incorporated or Qualified To Do Business in Florida <u>6/8/94</u>		
			5. FEI Number <u>20-3514154</u> Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>		
			6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for Certificate of Status		
7. Name and Address of Current Registered Agent					
Name <u>Raymond R Sessions</u>					
Street Address (P.O. Box Number is Not Acceptable) <u>2409 SW Sisters Welcome Rd</u>					
Suite, Apt. #, Etc. <u>Suite 101</u>					
City <u>Lake City</u> State <u>FL</u> Zip Code <u>32025</u>					
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 <u>Raymond R Sessions</u> Date <u>9/28/05</u>					
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	
V/P	<u>Stephen A Sessions</u>	<u>2409 SW Sisters Welcome Rd Suite 101</u>		<u>Lake City FL 32025</u>	
S/P	<u>Harold Frankel</u>	<u>1703 SW Sisters Welcome Rd</u>		<u>Lake City FL 32025</u>	
P/P	<u>Raymond R Sessions</u>	<u>2409 SW Sisters Welcome Rd</u>		<u>Lake City FL 32025</u>	
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: <u>Raymond R Sessions</u> <u>Raymond R Sessions</u> 9/27/05 4074364004					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

BRANNON, BROWN, HALEY & BULLOCK, P.A.

ATTORNEYS AT LAW

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†FLORIDA SUPREME COURT CERTIFIED CIRCUIT CIVIL MEDIATOR

W. BRANTLEY BRANNON
1907-1985

CLARENCE E. BROWN
1911-1997

September 29, 2005

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

RE: Reinstatement of Southern Approaches Property Owners Association I, Inc.
Our File No.: 29504.2

Dear Sir or Madam:

We ask that you please reinstate Southern Approaches Property Owners Association I, Inc. You will find the completed Florida Department of State Corporation Reinstatement application for Southern Approaches Property Owners Association I, Inc. and a check signed by Raymond R. Sessions, President of Southern Approaches Property Owners Association I, Inc. to cover the fees for reinstatement.

If you have any questions, please contact us. We thank you for your assistance on this matter.

Sincerely,
BRANNON, BROWN,
HALEY & BULLOCK, P.A.



William J. Haley, Esquire
For the firm

WJH/wls
Enclosure