PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## APPLICATION FOR REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

P97000073216 DOCUMENT #

1. Corporation Name

OTTER SPRINGS CORP.

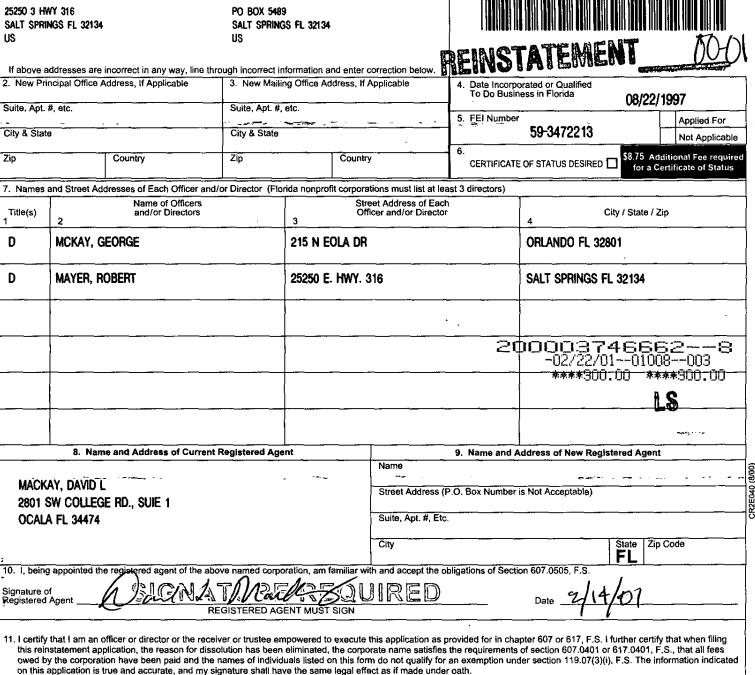
Principal Place of Business Mailing Address

25250 3 HWY 316 SALT SPRINGS FL 32134 PO BOX 5489

FILED

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SEGNETARY OF STATE
TALLAHASSEE, FLORIDA



02-09-2001 Date Daytime Phone # SIGNATURE AND TYPED OR PRINTED NAM

352-685-1900

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