

APPLICATION
FOR
REINSTATEMENT



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

FILED

99 NOV 15 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P9800003521699AR**
Corporation Name
Deer Creek Mfg Housing Sales, Inc
Principal Place of Business
Est # 17 / Deer Creek

Mailing Address
**RR 24 Box 60419
Lake City, FL 32026**

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

2 New Principal Office Address, If Applicable		3 New Mailing Office Address, If Applicable		4 Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		April 1998	
City & State		City & State		5 FEI Number	
Zip		Country		59-3514909	
				6 CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status	

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres.	Wayne Frier	12788 US 90W	Live Oak, FL 32060
Vice Pres.	Matthew Frier	12788 US 90W	Live Oak, FL 32060
Sec.	Linda Wood	Rt 17 Box 1038	Lake City, FL 32024
Treas.	Clyde Musgrove	8732 US 90	Live Oak, FL 32060
			300003053333-2
			-11/23/99-01067-011
			***150.00 ***150.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
		Name William S. Haley	
		Street Address (P.O. Box Number is Not Acceptable) 10 North Columbia St.	
		Suite, Apt. #, Etc.	
		City Lake City	
		State FL Zip Code 32056	

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 *[Signature]*
REGISTERED AGENT MUST SIGN

Date

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☒ (See other side for information on intangible tax.)

2. 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: *Linda Wood*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



Deer Creek Home Sales,
Linda Wood Real Estate Developer

RR 24 Box 60419
Lake City, FL 32024

November 17, 1999

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State of Florida
409 East James Street
Tallahassee, FL 32399

Attention: Tyron Scott

Please find enclosed the application for reinstatement. We did not receive any paper work before and would ask that you please accept our check for \$150.00 and waive any late fees this one time.

Thank you for your attention to this matter.

Sincerely,

Linda Wood
Secretary