

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR **82-97**
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

97 MAR 27 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 723739

1. Corporation Name

The Townhouses at Nova Condominium,
Inc., No. 3

Principal Place of Business

3655 S.W. 59th Avenue
Davie, Fla. 33314

Mailing Address

3655 S.W. 59th Ave.
Davie, Fla. 33314

700002127327--4
-03/28/97--01090--009
***1163.75 ***1163.75

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

2. New Principal Office Address, If Applicable

3653 SW 59th Ave.

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

3653 S.W. 59th Ave.

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

062272

5. FEI Number

65-0284335

Applied For

Not Applicable

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
Pres	John Wareham	14551 S.W. 17th Court	Davie, Fla. 33325
Vice Pres.	Brandy Dyball	3679 S.W. 59th Avenue	Davie, Fla. 33314
Sec/ Treas	Linda Williams	3653 S.W. 59th Avenue	Davie, Fla. 33314
D	Arlene Fisher	3745 S.W. 59th Avenue	Davie, Fla. 33314
D	Roberto Medero	3729 S.W. 59th Avenue	Davie, Fla. 33314
D	Carlos George	3715 S.W. 59th Avenue	Davie, Fla. 33314

8. Name and Address of Current Registered Agent

Bernard Gontko
3655 S.W. 59th Avenue
Davie, Florida 33314

REINSTATEMENT

9. Name and Address of New Registered Agent

Name
Levi England, Esquire
Street Address (P.O. Box Number is Not Acceptable)
7700 David Road Extension
Suite, Apt. #, Etc.

City
Hollywood, FL

State
FL

Zip Code
33024

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

REGISTERED AGENT MUST SIGN

Date **3/25/97**

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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 N. Williams Sec/Treas.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-25-97 (954) 384-7165

CR2E040 (1/2/96)