	PLEAS	E READ A	LL INST	RUCTIONS	BEFORE C	OMPLET	ING THIS	S FORM.		
APPLICATION FLOR			DEBARTMEN DE TAT			FILED				
REINSTATEMENT				VISION OF CORPO	1 92 JUN	2 JUN 11 PH 3:34				
DOCUMENT # 734854 1. Corporation Name						ELO LIARY OF STATE TULLY HUSTE, FLORIDA				
GOLF RIDGE VILLAS CONDOMINIUM UNIT C, INC.							**************************************	~~		
						61	-067.	15/99010	269 60014	
Principal Place of Business Mailing Add] - E 2 41 00 1441	(本本本) 1 (10(0) (10(1) (1)(1 0)	k315.00 * Norman kaka kaka kak	***315.00			
				10380 NW 7TH AVE. APT 103 IIAMI FL 33169-2426						
-						DEING	TATE	MENT	9900	
If above addresses are incorrect in any way, line through incorrect information and enter correction below New Principal Office Address, If Applicable 3 New Mailing Office Address, If Applicable										
				c 95 2.			ate Incorporated or Qualified of Do Business in Florida 01/27/1976			
Apt-106			City & State	5. FEI Nu			59-16996	96	Applied For	
Zip Country Zip				Country			\$8.75 Additional Fee required			
33/		ach Officer and las	Disposter /Fto	rida popracii asspera	things must lest at los	I	E OF STATUS DE	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) Name of Officers Title(s) Name of Officers and/or Directors Street Address of Each Officer and/or Director City / State / Zip									Zin	
1 2			3 (Do NOT Use Post Office Box Numbers)			4				
PUP	Cober Julien			20380 NE-7TH AVE. #205			MIAMI FL	33/65		
ST	LOPEZ, LIDIA			20380 NW 7TH AVE 105			MIAMI FL	33/69		
P/T	THORN, PETER-	lliaus		20380 NW 7TH AVE.#106			MIAMI FL	33169		
D	SIMARD, PAUL. ANNETT.	Jean-BA	phista	20380 NW 7TH AVE., #202			MIAMI FL	33/69		
D	Joseph Ru	issell		20380 NW 7TH AVE. \$207- /03			MIAMI FL	33/69		
ST	OOLLINS, P.			20380 NW 7TH AVE., #107			MIAMI FL			
						9. Name and	9. Name and Address of New Registered Agent			
THORN, PETER						th Williams				
20380 NW 7TH AVE 20380						eth Williams (P.O. Box Number is Not Acceptable) 7. W. 7 Ava				
APT 106 Suite, Apt. #, Etc. MIAMI FL 33169										
1 miam									9 Code 33/69	
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.									. (24)	
Registered Agent Alnnell MWilliams REGISTERED AGENT MUST SIGN Date: 4-23-19										
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No No 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 filling 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/ees 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 individuals listed on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.										
Langle M Williams							423	-77		
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Disjunic Phone #									E Phone #	