

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

APPROVED
AND
FILED

97 NOV -7 PM 2:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **746314**

1. Corporation Name

BEECHWOOD ESTATES ASSOCIATION, INC.

Principal Place of Business

Mailing Address

~~5 MIMOSA DRIVE~~
SARASOTA FL 34232
US

~~5 MIMOSA DRIVE~~
SARASOTA FL 34232
US



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

2. New Principal Office Address, If Applicable

Alice Hostetler
Suite, Apt. #, etc.

330 Mimosa Cir.

City & State

Sarasota, Fl.

Zip

34232

Country

Sarasota

3. New Mailing Office Address, If Applicable

Alice Hostetler
Suite, Apt. #, etc.

330 Mimosa Cir.

City & State

Sarasota, Fl.

Zip

34232

Country

Sarasota

4. Date Incorporated or Qualified
To Do Business in Florida

08/20/1979

5. FEI Number

65-0164391

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

**\$0.75 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
PD	HADDEN, GORDAN Dan Rich	300 MIMOSA DR 205 Mimosa Cir.	SARASOTA FL 34232
VPD	HENRICH, DONALD Erich Lah	270 MIMOSA DR 185 Mimosa Cir.	SARASOTA FL 34232
SD	LUCE, CHARLENE Mary Ann Bassignani	75 MIMOSA DRIVE 35 Mimosa Dr.	SARASOTA FL 34232
TD	DOUGLASS, ALLAN M Alice Hostetler	5 MIMOSA DR 330 Mimosa Cir.	SARASOTA FL 34232
D	KELTON, LORYN	230 MIMOSA DR	SARASOTA FL

8. Name and Address of Current Registered Agent

DOUGLASS, ALLAN M
5 MIMOSA DR.
SARASOTA FL 34232

9. Name and Address of New Registered Agent

Name
Alice Hostetler
Street Address (P.O. Box Number is Not Acceptable)
330 Mimosa Cir.
Suite, Apt. #, Etc.
Sarasota, Fl. 34232
City
State
FL Zip Code
34232

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

Alice M. Hostetler
REGISTERED AGENT MUST SIGN

Date **Nov. 4, 1997**
500002345445-4
11/12/97-01112-005
*******See other side for *****286.25**
on intangible tax.)

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

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:

Alice M. Hostetler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nov. 4-97 941-371-3737
Date Daytime Phone #

CR2E040 (8/97)