

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED

98 NOV 25 AM 9:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 749389

1. Corporation Name

MARINE COLONY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1280 SW 36 AVE #301
2800 NE 14TH ST. CAUSEWAY
POMPAHO BEACH FL 33062 33069

Mailing Address

1280 SW 36 AVE #301
2800 NE 14TH ST. CAUSEWAY
POMPAHO BEACH FL 33062 33069

REINSTATEMENT

98

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

10/18/1979

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2145343

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

100002701060--2

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
D	SATTERTHWAITE, AMANDA	2800 NE 14TH STREET #210	-12/03/98--01005--011
D	DEROSA, BLAISE	1280 SW 36 AVE #301	***236.25
P	VIRGA, THEODORE R MCGOWAN, DEAN	2800 NE 14TH STREET #128	***236.25
D	TAURINSKI, CATHERINE FERRI, FRANK	1140 SE 14TH TERR	
VPD	JANOWICH, VINCENT	2800 NE 14ST #128	
S	WILCOX, THOMAS	1280 SW 36 AVE #301	
VP	LYONS, DONNA	2800 NE 14 STRETE #115	
		1280 SW 36 AVE #301	

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

VIRGA, THEODORE R
2800 NE 14TH STREET
STE #128
POMPAHO BEACH FL 33062

Name

DEAN MCGOWAN

Street Address (P.O. Box Number is Not Acceptable)

1280 S.W. 36 AVE #301

Suite, Apt. #, Etc.

City

POMPAHO BEACH

State

Zip Code

FL

33069

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

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 11/17/98

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/17/98

Date

954 969-1330

Daytime Phone #