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# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 AUG -5 AM 10:21



**DOCUMENT # 757250**  
1. Entity Name  
**ENCHANTED ISLE RESORT CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business  
**1601 SOUTH SURF ROAD  
HOLLYWOOD, FL 33019**

Mailing Address  
**3015 N. OCEAN BLVD  
STE 121  
FORT LAUDERDALE, FL 33308**

2. Principal Place of Business - No P.O. Box #  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

Zip Country



06292009 REIN-NP CR2E099 (1/07)

**6. Name and Address of Current Registered Agent**  
**FOSTER, REBECCA  
3015 N. OCEAN BLVD.  
STE 121  
FT. LAUDERDALE, FL 33308**

**7. Name and Address of New Registered Agent**  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE DATE **7/29/09**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$122.50** In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. **Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDT FOSTER, REBECCA A 1601 SOUTH SURF ROAD HOLLYWOOD, FL 33019 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LATINO, BOB 1601 SOUTH SURF ROAD HOLLYWOOD, FL 33019 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD QUACKENBOSS, WILLIAM 1601 SOUTH SURF ROAD HOLLYWOOD, FL 33019 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D QUACKENBOSS, WILLIAM JR. 1601 SOUTH SURF ROAD HOLLYWOOD, FL 33019 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, BILL 1601 SOUTH SURF ROAD HOLLYWOOD, FL 33019 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>04/25/08 90162 001 211.25</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>11/04/08 01037 004 236.25</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>400159308664</b> <b>11/04/08--01037--004 **236.25</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>400159308664</b> <b>04/25/08--90162--001 **211.25</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>B 8/6/09</b> <b>08-09</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>REINSTATEMENT</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DATE **7/29/09** Daytime Phone # **954-503-2444x304**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



The Berkley Group

July 30, 2009

Florida Department of State  
Division of Corporations  
Attn: Tyrone Scott  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Reinstatement of Enchanted Isle Resort Condominium Association, Inc.  
Document #757250

Mr. Scott,

Thank you for speaking with me on this matter. As we discussed, I am sending this letter to formally request that 1) Enchanted Isle Resort Condominium Association, Inc. ("EIC") be reinstated as an Active Entity and 2) we receive a refund of any amount we overpaid to file the Annual Report and Reinstatement for EIC.

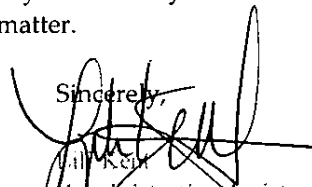
Enclosed are the following:

- a) A copy of the 2008 Annual Report form for EIC dated 4/9/08
- b) A copy of check #3630 in the amount of \$211.25 (front and back showing that it cleared on 4/25/08; this check was intended to be credit as follows: \$61.25 for EIC and \$150.00 for Hollywood Isle Development, Inc.)
- c) A copy of the 2008 Reinstatement form for EIC submitted 10/31/08
- d) A copy of Check #14449 in the amount of \$236.25 (front and back showing that it cleared on 11/5/08; this check was intended for EIC to pay the Annual Report Fee plus a penalty for late filing)
- e) Original 2009 Reinstatement form for EIC (no check is being submitted as we are due a refund)

As you can see, the Annual Report Form was submitted properly and timely but it appears that check #3630 was credited entirely to Hollywood Isle Development, Inc. ("HID") and EIC's Annual Report was not filed for lack of payment. When we received Notice of Dissolution or Revocation for EIC, we submitted the Reinstatement Form along with check #14449. It appears that the Reinstatement Form and check were never acknowledged and therefore EIC was not reinstated.

I believe that the original check submitted (check #3630) was sufficient to cover both the Annual Report Fee for HID (\$150.00) and EIC (\$61.25). Therefore, the refund of overpayment should be in the amount of \$236.25. Kindly forward a check in the amount of \$236.25 to our office as soon as possible. If there are additional fees or any miscalculations on my part, please let me know.

If you have any questions or should you need any additional information, please do not hesitate to contact me. Thank you again for your assistance in this matter.

Sincerely,  
  
Jill Kent  
Administrative Assistant  
Email: [lkent@theberkleygroupinc.com](mailto:lkent@theberkleygroupinc.com)