


PLEASE READ ALL INSTRUCTIONS BEFORE COMF

FILED
Mar 11, 2002 8:00 am
Secretary of State

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N00000007057

1. Corporation Name
Highland Beach Club Condominium Association, Inc.

281

100005145261--2
 -03/22/02--01005--020
 *****61.25 *****61.25

2. Principal Office Address <u>3600 S. Ocean Blvd</u>		3. Mailing Office Address <u>Same</u>	
Suite, Apt. #, etc. <u>107</u>		Suite, Apt. #, etc. <u>Same</u>	
City & State <u>Highland Beach FL</u>		City & State	
Zip <u>33487</u>	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 65-1052577 Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name Gary A. Saul, Esq

Street Address (P.O. Box Number is Not Acceptable)
1221 Brickell Avenue

Suite, Apt. #, Etc.

City Miami State FL Zip Code 33131

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent [Signature] Date 1-30-02

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	<u>SETH KAUFMAN</u>	<u>551 NW 77th St Suite 108</u>	<u>BOCA RATON FL 33488</u>
VP	<u>Hedder Pierre</u>	<u>" "</u>	<u>" "</u>
Sec	<u>Doug Kellington</u>	<u>" "</u>	<u>" "</u>
PD	<u>Jerry Kaufman</u>	<u>" "</u>	<u>" "</u>
UTD	<u>Edward Popkin</u>	<u>" "</u>	<u>" "</u>
SD	<u>LEONARD ALBANESE</u>	<u>" "</u>	<u>" "</u>

10. 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] Date 1-25-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (8/01)