

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 21 AM 8:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N02000008709

1. Corporation Name

VILLAGE BY THE BAY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3285 NE 184TH STREET  
AVENTURA FL 33160

3285 NE 184TH STREET  
AVENTURA FL 33160

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

11/12/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

Not Applicable

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)

| Title(s)<br>1  | Name of Officers<br>and/or Directors<br>2 | Street Address of Each<br>Officer and/or Director<br>3 | City / State / Zip<br>4     |
|----------------|---|--|-----------------------------|
| PD             | EMMERMAN, HERBERT P                       | 211 E ONTARIO ST STE 500                               | CHICAGO IL 60611            |
| VD             | BAILEY, FORREST                           | 33 W MONROE ST   | CHICAGO IL 60611            |
| <del>STD</del> | <del>BANCROFT, TODD</del>                 | <del>211 E ONTARIO ST STE 500</del>                    | <del>CHICAGO IL 60611</del> |
| STD            | IAN Vucetich                              | 3285 NE 184th St. # 12204                              | Aventura, FL 33160          |
|                |   |  |                             |
|                |   |  |                             |

700023971837  
10/21/03--01071--019 \*\*236.25

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BEKKEVOLD, RALPH B ESQ  
BUCHANAN INGERSOLL PROFESSIONAL CORP  
100 SE SECOND STREET SUITE 2100  
MIAMI FL 33131

Name

James Mikel Guy, CAM - Draper + Kramer Management

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

4493 Lake Tahoe Circle

Suite, Apt. #, Etc.

City

West Palm Beach

State

FL

Zip Code

33409

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. or 617.0505, F.S.

Signature of  
Registered Agent

*James Mikel Guy*  
REGISTERED AGENT MUST SIGN

Date

10/10/03

11. 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:

*James Mikel Guy*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/15/03 (312) 580-  
Daytime Phone # 537