


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



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

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

01 DEC 17 PM 4:00

DOCUMENT # No4758

1. Corporation Name
 80 ROYAL PALM CONDOMINIUM ASSOCIATION, INC.
 W01000021855

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 -01/08/02--01027--020
 *****61.25 *****61.25

2. Principal Office Address 1570 S. 42 ND CIRCLE Suite, Apt. #, etc. 202 City & State VERO BEACH, FL Zip 32967-8133 Country USA		3. Mailing Office Address 1570 S. 42 ND CIRCLE Suite, Apt. #, etc. 202 City & State VERO BEACH, FL Zip 32967-8133 Country USA	
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REINSTATEMENT 9201

4. Date incorporated or Qualified To Do Business in Florida 1/1/84

5. FEI Number 59-2450816 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 SANDRA C. GRIFFIN
 Street Address (P.O. Box Number is Not Acceptable) 1570 S. 42ND CIRCLE
 Suite, Apt. #, Etc. 202
 City VERO BEACH
 State FL Zip Code 32967-8133

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 Sandra C. Griffin
 Date 11/21/01
 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.	SANDRA C. GRIFFIN	1570 S. 42 ND CIRCLE # 202	VERO BEACH, FL 32967
TREAS.	TERRI HALE	80 ROYAL PALM POINTE # 404	VERO BEACH, FL 32960
SEC.	SCOTT MCGUIRE	80 ROYAL PALM POINTE # 401	VERO BEACH, FL 32960

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: Sandra C. Griffin
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date 11/21/01
 Daytime Phone # 61-978-4175

CORPORATE (REV. 02)