

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

98 DEC 17 PM 4:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N09030

1. Corporation Name
Woodshire Homeowners Association, Inc.

Principal Place of Business Mailing Address

**202 Woodshire Lane
Naples, FL 34105**

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

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. Date Incorporated or Qualified To Do Business in Florida **May 2, 1985**

5. FEI Number Applied For / Not Applicable

59-2519162 Applied For / Not Applicable

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

REINSTATEMENT 89-98

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

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	Daniel Giroux	217 Woodshire Lane	Naples, FL 34105
D	Peggy Weaver	102 Woodshire Lane	Naples, FL 34105
D	Barbara Kalupy	205 Woodshire Lane	Naples, FL 34105
D	John Ribes	218 Woodshire Lane	Naples, FL 34105
D	John Ordway	206 Woodshire Lane	Naples, FL 34105
D	Vincent DiVito	101 Woodshire Lane	Naples, FL 34105

8. Name and Address of Current Registered Agent

**John M. Swalm, III
600 5th Ave S, Ste 210
Naples, FL 34102**

9. Name and Address of New Registered Agent

Name: **Dawn M. Csogi**

Street Address (P.O. Box Number is Not Acceptable): **202 Woodshire Lane**

Suite, Apt. #, Etc.

City: **Naples** State: **FL** Zip Code: **34105**

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: *Dawn Marie Csogi* Date: 12-4-98

REGISTERED AGENT MUST SIGN

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)(j), 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: *Daniel Giroux* Date: 12-4-98 Daytime Phone #: 941-649-8597

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR6040 (1/88)