PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State FILED DIVISION OF CORPORATIONS DOCUMENT #NO9422 59 mm 26 MIII: 52 1. Corporation Name SECRETARY OF STATE CENTRAL PARK CONDO ASSOC OF PALM BEACH INC. Principal Place of Business Mailing Address 3520 Investment Lane Suite 6 Riviera Beach, FL 33404 If above addresses are incorrect in any way, fine through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 3520 Investment Lane Suite, Apt. #, etc. 3520 Investment Lane Suite, Apt. #, etc Unit 6 5 FEI Number Unit 6 Applied For City & State 59-2601305 Riviera Beach, FL Not Apolicable Riviera Beach, FL \$8.75 Additional Fee required for a Certificate of Status 3340<u>4</u> Country USA USA 33404 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprolit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Title(s) City / State / Zin Palm Beach Gardens, FL oCole, Phillip H. 8287 Kelso Drive 33418 Royal Palm Beach, FL D 141 Roy Court Circle Oberg, Eric _33411 6564 Chasewood Drive N. Apt. F Lauren, Nancy Jupiter. FL 33458 700002829707--8 -04/05/93---01130---008--****980.00 ****980.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name Eric Oberg Eric Oberg 3520 Investment lane Street Address (P.O. Box Number is Not Acceptable) Suite 6 3520 Investment Lane Suite, Apt. #, Etc Unit 6 Riviera Beach, FL 33404 Zip Code <u>Riviera</u> Beach 33404 10 1, 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 STERED AGENT MUST SIGN 11. This corporation owes the current year (See other side for information Yes 🔲 No 🔯 on intangible tax.) Intangible Personal Property Tax due June 30. 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 filling 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. NAME OF SIGNING OFFICER OR DIRECTOR