

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 FEB -8 AM 10:33

DOCUMENT # N24950

1. Corporation Name
Southwest CAPE CORAL Homeowners
ASSOCIATION, INC.

800065817088
02/14/06--01016--012 **306.25

2. Principal Office Address

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4518 SW 23 AVE

4518 SW 23 AVE

City & State

City & State

CAPE CORAL, FL

CAPE CORAL FL

Zip

Country

Zip

Country

33914

US

33914

US

REINSTATEMENT 02-06
CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

02/22/1988

5. FEI Number

N/A

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

RICKERT James L.

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

4518 SW 23 AVE

Suite, Apt. #, Etc.

City

CAPE CORAL

State

FL

Zip Code

33914

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 1-26-06

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
PD	RICKERT James L.	4518 SW 23 AVE	CAPE CORAL, FL 33914
VPD	SWEIGERT James E	2315 SW 45 th TERR	CAPE CORAL, FL 33914
T	JOHNSON Rick A.	2306 SW 51 ST STREET	CAPE CORAL, FL 33914
BD	MORREAL JULIUS	4105 SW 27 AVE	CAPE CORAL, FL 33914
BD	COLON George	3211 SW 27 th PL	CAPE CORAL, FL 33914
BD	ALLEYNE George	2620 SW 41 STREET	CAPE CORAL, FL 33914

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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JAMES L. RICKERT 1-26-06 239-770-8445

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Additional Board Members:

BD Cervoni Joe 2824 SW 38 Terr Cape Coral, Fl 33914

BD Zizzamia Vito 4841 SW 23 Ave Cape Coral, Fl 33914

S Rickert Stephanie 4518 Sw 23 Ave Cape Coral, Fl 33914

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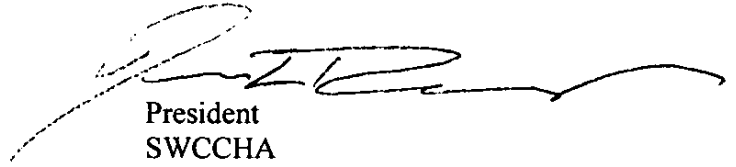
James L. Rickert
4518 S.W. 23 Avenue
Cape Coral, Florida 33914

Florida Department Of State
Secretary of State
Division of Corporations

To Whom It May Concern:

This is written to inform you that that I have not received the renewal forms for the Southwest Cape Coral Homeowner's Association, Inc. for the past four years, or since the year 2001.

James L. Rickert



President
SWCCHA