

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *Page 1 of 2*

APPLICATION
FOR



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

FILED

00 DEC -8 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N42504

1. Corporation Name

NORWICH K CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

253 NORWICH K
CENTURY VILLAGE
WEST PALM BEACH FL 33417

253 NORWICH K
CENTURY VILLAGE
WEST PALM BEACH FL 33417

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

03/11/1991

5. FEI Number

59-1649717

Applied For

Not Applicable

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	DUNN, HOWARD	244 NORWICH K	WEST PALM BCH FL 33417
T	WANTLAND, MARGARET	260 NORWICH K	WEST PALM BEACH FL 33417
P	YANITY, KAREN	253 NORWICH K	WEST PALM BEACH FL 33417
VP	HARTMAN, KATHERINE	254 NORWICH K	WEST PALM BEACH FL 33417
S	BECTHEL, ROSE	255 NORWICH K	WEST PALM BEACH FL 33417
BOD	BLUMBERG, MOLLY	245 NORWICH K	WPB FL 33417

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

YANITY, KAREN 253 NORWICH K CENTURY VILLAGE W. PALM BEACH FL 33417	Name	700003505637--E	
	Street Address (P.O. Box Number is Not Acceptable)	253 NORWICH K	
	Suite, Apt. #, Etc.	*****61.25 *****61.25	
	City	State	Zip Code
		FL	

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

Karen Yanity
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 10-21-00

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:

Karen Yanity
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-21-00
Date

561-688-1489
Daytime Phone #

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N42504

December 4, 2000

Mr. Tyrone
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Mr. Tyrone,

This letter is concerning document # N42504. Norwich K Association did not receive any annual report form in May of 2000. First notice received was October 18, 2000 at which time a check for the amount of \$61.25 was sent to your office on October 21, 2000. Therefore the Board of Directors of Norwich K Association is requesting that you waive the late fee.

I am enclosing the original check payable to the Department of state and the completed form. Any problems please feel free to contact me. Thanking you in advance for your cooperation with this matter.

Sincerely,



Karen Yarity
President Norwich K Association

561-688-1489

