

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Jill Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 OCT 25 AM 8:01

DOCUMENT # NU3384

1. Corporation Name **LAKEVIEW TOWNHOMES  
AT THE CALIFORNIA CLUB CONDOMINIUM  
ASSOCIATION, INC.**

100008593621  
10/25/02--01059--005 \*\*61.25

2. Principal Office Address **C/O  
NORTHEAST DADE COALITION**

3. Mailing Office Address **C/O  
NORTHEAST DADE COALITION**

Suite, Apt. #, etc.  
**P.O. Box 800417**

Suite, Apt. #, etc.  
**PO-BOX 800417**

City & State  
**AVENTURA, FL**

City & State  
**AVENTURA, FL**

Zip  
**33280**

Country  
**USA**

Zip  
**33280**

Country  
**USA**

4. Date Incorporated or Qualified,  
To Do Business in Florida **5/13/97**

5. FEI Number  
**650260339**

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 **PAUL LIBERT**  
Street Address (P.O. Box Number is Not Acceptable)  
**21155 HELMSHAN DR.**  
Suite, Apt. #, Etc.  
**M14**  
City  
**AVENTURA**

State  
**FL**

Zip Code  
**33180**

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 **Paul Libert**  
REGISTERED AGENT MUST SIGN  
Date **10/10/02**

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

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip          |
|--------|--------------------------------------|---------------------------------------------------|-----------------------------|
| PO     | LOARRINE BODEK                       | 20834 SAN SIMEON WAY #63                          | NORTH MIAMI BEACH, FL 33177 |
| SD     | DIANE ALEXANDER                      | 20834 SAN SIMEON WAY #70                          | "                           |
| STS    | RICHARD HOWERTON                     | 20834 SAN SIMEON WAY #64                          | "                           |
|        |                                      |                                                   |                             |
|        |                                      |                                                   |                             |
|        |                                      |                                                   |                             |

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: **Lorraine Bodek** **10-18-02** **305 361-3393**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date  
Daytime Phone #

CR2E081 (9/01)

10/14/02

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# *Lakeview Townhomes*

*at the California Club*

October 12, 2002

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

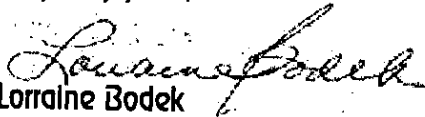
RE: Document # N43384

To whom it may concern:

This is to request reinstatement of Lakeview Townhomes at the California Club Condominium association, Inc. without penalty. The reason the Association did not file its corporate annual report was simply because we had not receive it.

Please revise your records to reflect the new current registered agent.

Very truly yours,

  
Lorraine Bodek  
President

c/o Northeast Dade Coalition

P.O. Box 800417 • Aventura, Florida 33280-0417

305.933.9775 • FAX: 305.935.2170 • Email: NEDCFLA@AOL.COM