

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION FOR REINSTATEMENT**



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

**FILED**

98 JUL 13 AM 8:59

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT #N43591

1. Corporation Name

ISLAMORADA AT CORAL BAY VILLAGE ASSOCIATION, INC

Principal Place of Business

Mailing Address

c/o Alliance Property Systems  
 7101 W Commercial Blvd  
 Suite 4-A  
 Fort Lauderdale FL 33319

PO Box 26478  
 Ft Lauderdale FL  
 33320-6478

If above address is incorrect, list correct information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

5/28/91

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-0404359

Not Applicable

Zip

Country

Zip

Country

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DP	Richard Weinstein	3218 W. Buena Vista Dr	Margate FL 33063
DST	Sarah S. Shoemaker	3298 W Buena Vista Dr	Margate FL 33063
D	Todd Tyrrell	3186 W Buena Vista Dr	Margate FL 33063

**REINSTATEMENT**

97-98 JS  
 7/14

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Richard Weinstein  
 3218 W Buena Vista Dr  
 Margate FL 33063

Name

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

900002589859-5

Suite, Apt. #, Etc.

-07/15/98--01068--002

City

\*\*\*297.50 FL \*\*\*297.50

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

*Richard B. Weinstein*

REGISTERED AGENT MUST SIGN

7-7-98

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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Richard B. Weinstein*

Richard B. Weinstein

7-7-98 954-975-8656

CR2E040 (1/98)