

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

00 FEB -4 PM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000002435

1. Corporation Name VILLAS AT ISLAND CLUB CONDOMINIUM
ASSOCIATION, INC.

Principal Place of Business

2180 WEST S.R. 434, SUITE 5000
LONGWOOD, FL 32779-5044

Mailing Address

2180 WEST S.R. 434
SUITE 5000
LONGWOOD, FL 32779-5044

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

4. Date Incorporated or Qualified
To Do Business in Florida

04/29/1996

SP

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3550874

Applied For

Not Applicable

City & State

City & State

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	
1	2	3	4
PSTD	EARL W. PECK, JR.	3175 LINFIELDS BLVD.	KISSIMMEE, FL 34747
VD	CHRIS WALTON	3175 LINFIELDS BLVD.	KISSIMMEE, FL 34747
D	MICHAEL BUTLER	3175 LINFIELDS BLVD.	KISSIMMEE, FL 34747
FD	RAYMOND BRODICK	8717 C ROCKINGHAM TERR	KISSIMMEE FL 34747
VD	BOB PATTERSON	8725 TERRA VISTA CIR APT 101	KISSIMMEE FL 34747
STD	LAURA SNYDER	34 RIVERBEND RD	CLINTON NJ 08809

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

EARL W. PECK, JR.
3175 LINFIELDS BLVD.
KISSIMMEE, FL 34747

Name

JAMES W. HART, JR.

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

2180 WEST S.R. 434

Suite, Apt. #, Etc.

SUITE 5000

City

LONGWOOD

State

FL

Zip Code

32779-5044

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

REGISTERED AGENT MUST SIGN

Date

10/29/99

11. This corporation owes 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:

Raymond Brodick

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/26/2000

Date

407-397-1309

Daytime Phone #

CR2E081 (12/98)