

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

97 DEC 11 PM 1:38

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **N96000004996**

1. Corporation Name
BRIGHTON'S MEADOW LANDINGS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business 815 NO. RED ROAD SUITE 400 MIAMI FL 33126	Mailing Address 815 NO. RED ROAD SUITE 400 MIAMI FL 33126
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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 09/26/1996
Sulte, Apt. #, etc.		Sulte, Apt. #, etc.		5. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
City & State		City & State		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status
Zip	Country	Zip	Country	

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
PO	SMITH, DONALD G	815 N. RED ROAD, SUITE 400	MIAMI FL 33126
STD	SMITH, LESLIE G	815 N. RED ROAD, SUITE 400	MIAMI FL 33126
PD	STIEGELE, ROBERT	815 N. RED ROAD, SUITE 400	MIAMI FL 33126
VSD	RAMOS, LISA		
VTD	MENSCH, CHARLES		

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8. Name and Address of Current Registered Agent

LEOPOLD, NORMAN
 20801 BISCAYNE BOULEVARD
 SUITE 501
 AVENTURA FL 33180

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 96 12-16-97

REINSTATEMENT

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 *[Signature]* Date **12/3/97**
 REGISTERED AGENT MUST SIGN

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]* **CHARLES MENSCH** Date **10/30/97** Daytime Phone # **305-262-6100**

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

CR2E040 (8/97)