PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JAN 29 AM 9:25

DOCUMENT # N96000006290

REINSTATEMENT 01-03

900009222539
11/26/02--01035--017 **175.00

900009222539
02/05/03--01017--018 **272.50

1. Corporation Name
Ocean Way Villas Homeowner's Association, INC.

2. Principal Office Address	3. Mailing Office Address
832 S.E. 20th Ave	832 S.E. 20th Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Deerfield Beach, FL.	City & State: Deerfield Beach, FL
Zip: 33441 Country: USA	Zip: 33441 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 12/10/96

5. FEI Number: 650885097 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

900009222539
01/14/03--01080--004 **61.25

Name: Robert G. Harris
Street Address (P.O. Box Number is Not Acceptable): 530 South Federal Highway # 201
Suite, Apt. #, Etc.:
City: Deerfield Beach State: FL Zip Code: 33441

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: Robert G. Harris, Esquire Date: 11/14/02
REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres,D	Raymond Zielinski	832 S.E. 20th Ave	Deerfield Bch, FL 33441
Trea,D	Deborah Zielinski	832 S.E. 20th Ave	Deerfield Bch, FL 33441
D	Peter Zielinski	832 S.E. 20th Ave	Deerfield Bch, FL 33441

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: Raymond Zielinski Raymond Zielinski 11/14/02 954-415-0587
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #