

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 AUG 25 PM 1:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N 98000001240

1. Corporation Name

PARKWOOD AT KENSINGTON
HOMEOWNERS ASSOCIATION INC.

2. Principal Office Address

2800 E. COMMERCIAL BLVD

Suite, Apt. #, etc.

208

City & State

FT. LAUDERDALE, FL

Zip

33308

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

3/3/98

5. FEI Number

65-0859375

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

ALLEN H. KATZ

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

2800 E. COMMERCIAL BLVD

Suite, Apt. #, Etc.

SUITE 208

City

FT. LAUDERDALE

State

FL

Zip Code

33308

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

REGISTERED AGENT MUST SIGN

Date

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.	MANDY DIXON	10932 N.W. 56 TH CT	CORAL SPRINGS, FL 33076
V.P.	MARTIN HAUSKE	5670 NW 109 TH WAY	CORAL SPRINGS, FL 33076
TREAS.	MURTAZA HASHAM	10988 NW 56 TH CT	CORAL SPRINGS, FL 33076
SEC.	DIANE SCAPEROTTA	5750 NW 109 TH WAY	CORAL SPRINGS, FL 33076
DIR.	MAURICE CONTRERAS	10918 NW 56 TH CT	CORAL SPRINGS, FL 33076

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)(l), 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

Date

Daytime Phone #

Mandy Dixon Mandy Dixon 7/28/04 454-9280707

CR2E081 (07/04)

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FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 28, 2004

Florida Dept of Revenue
5050 Tennessee Street
Tallahassee, Florida

Re: Parkwood At Kensington Homeowners Assoc. Inc.
Document # N98000001240

To Whom It May Concern:

I called to inform you that I never received the Corporation Annual report. I was told to pull one off the Internet and send the \$300.00 so that you can file it. Thank you for all your help with this matter.

Thank You



Andrew Sorrentino President

Please abate the penalty
Thank You