

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # P95000070735

1. Corporation Name

GWD ORLANDO 109, INC.

Principal Place of Business

432 ROUTE 206 NORTH  
BEDMINSTER NJ 07921  
US

Mailing Address

P.O. BOX 4094 N/A  
BEDMINSTER NJ 07921  
US

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

09/13/1995

5. FEI Number

59-3346716

Applied For

Not Applicable

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	GALE, STANLEY C	200 CAMPUS DRIVE, STE. 200	<del>FLORHAM PARK NJ</del> Florham Park, NJ 07932
D	WENTWORTH, FRANCIS X JR.	200 CAMPUS DRIVE, STE. 200	<del>FLORHAM PARK NJ</del> Florham Park, NJ 07932
D	DILLON, THOMAS H	432 ROUTE 206 NORTH	<del>BEDMINSTER NJ</del> Bedminster, NJ 07921
D	KITSON, SYDNEY M.	432 ROUTE 206 NORTH	<del>BEDMINSTER NJ</del> Bedminster, NJ 07921
			900002375439--4 -12/17/97--01093--019 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

~~GOBERING, GRAY & WHITE, P.A.~~  
~~201 S. ORANGE AVENUE~~  
~~SUITE 700~~  
~~ORLANDO FL 32801~~

9. Name and Address of New Registered Agent

Intrastate Registered Agent Corporation

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

701 Brickell Avenue

Suite, Apt. #, Etc.

Suite 3000

City

Miami

State

FL

Zip Code

33131-3209

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

Intrastate Registered Agent Corporation  
VICE PRESIDENT  
REGISTERED AGENT MUST SIGN

Date 12/11/97

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

11-14-97

Date

908-781-5800

Daytime Phone #