

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

APPROVED
AND
FILED

1998 JAN -2 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # NO1094

1. Corporation Name

SOCIETY HILL HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

c/o Associated Property Management
400 S. Dixie Hwy, #10
Lake Worth, FL 33460

500002393145---9

-01/07/98--01094--014

****236.25 ****236.25

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
c/o Jean Foster Management

3. New Mailing Office Address, If Applicable
Same as 2.

4. Date Incorporated or Qualified
To Do Business in Florida

1-26-84

Suite, Apt. #, etc.
4930 Luwal Drive

Suite, Apt. #, etc.

5. FEI Number
59-2469336

Applied For

City & State
West Palm Beach, FL

City & State

Not Applicable

Zip **33415-1333** Country **Palm Beach**

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) 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
P-D & Dir.	Andrea Albertson	832 A Hill Drive	West Palm Beach, FL 33415
V-P & Dir.	Wendy Weiss	832 D Hill Drive	West Palm Beach, FL 33415
Sec. & Dir.	Michelle Holmes	850 B Hill Drive	West Palm Beach, FL 33415
Tres. & Dir.	James Shorey	781 D Hill Drive	West Palm Beach, FL 33415
Dir.	Deanna Gettig	5112 E. Society Pl. W.	West Palm Beach, FL 33415

REINSTATEMENT

8. Name and Address of Current Registered Agent

**St. John King & Dicker
Assoc. Property Management
400 S. Dixie Highway, Suite 10
Lake Worth, FL 33460**

9. Name and Address of New Registered Agent

Name
St. John, Dicker & Caplan
Street Address (P.O. Box Number is Not Acceptable)
500 Australian Avenue South
Suite, Apt. #, Etc.
#600
City
West Palm Beach

State
FL Zip Code
33401

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 **12/11/97**

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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:

Andrea Albertson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12-18-97 1-561-657006