PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. PAGE 1 OF 2

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 APR 17 PM 3:01

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05/02/06--01058--025 **8.75

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05/02/06--01058--024 **358.75

CR2E081 (12/05)

DOCUMENT # 762562

1. Corporation Name
Hollywood ESTATES INDEPENDENT TENANTS ASSOCIATION, INC.

2. Principal Office Address	**3.** Mailing Office Address
3300 N. STATE RD 7	3300 N. STATE RD 7
Suite, Apt. #, etc.: Box J757	Suite, Apt. #, etc.: Box J757
City & State: Hollywood, Florida	City & State: Hollywood, Florida
Zip: 33021 Country: U.S.A.	Zip: 33021 Country: U.S.A.

4. Date Incorporated or Qualified To Do Business in Florida: 03/23/1982

5. FEI Number: 650089660 ☐ 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: MARY A. moore

REINSTATEMENT 04 Apr 19 04

Street Address (P.O. Box Number is Not Acceptable): 3300 N. STATE RD 7

Suite, Apt. #, Etc.: Box J752

City: Hollywood State: FL Zip Code: 33021

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: Mary A. Moore
REGISTERED AGENT MUST SIGN

Date: 04-10-06
PH: 954-983-9611

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
PD	MARY A. moore	3300 N. STATE RD 7 - Box J752	Hollywood, FL. 33021
VPD	Robert Marino	3300 N. STATE RD 7 - Box B193	Hollywood, FL - 33021
SD	Barbara Giannettino	3300 N. STATE RD 7 - Box B187	Hollywood, FL. 33021
TD	NANCY GALLAGHER	3300 N. STATE RD 7 - Box F492	Hollywood, FL. 33021
FSD	Mary Jo Byrne	3300 N. STATE RD 7 - Box F494	Hollywood, FL. 33021
D	RAYNALD BOUCHARD	3300 N. STATE RD 7 - Box A10	Hollywood, FL. 33021

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 contained in Chapter 119, 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: Nancy Gallagher 04-10-06 954-983-9510
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ADDITIONAL DIRECTORS:

D	JEAN DESBIENS	3300 N. STATE RD 7	Box B113	Hollywood, FL. 33021
D	MYERS, MAURICE	3300 N. STATE RD 7	Box C245	Hollywood, FL. 33021
D	DAGENAIS, LOUISE	3300 N. STATE RD 7	Box D351	Hollywood, FL. 33021