

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 MAR 22 AM 11:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #445286

1. Corporation Name

Marco Woods, Inc.

Principal Place of Business

Mailing Address

c/o Lynne Hyatt

3013 Carambola Circle South

Coconut Creek, FL 33066

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

4. Date Incorporated or Qualified
To Do Business in Florida

FEB 5 1974

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number 65-0984717

X Applied For

City & State

City & State

(APPLIED FOR)

Not Applicable

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
T/S/D	LYNNE HYATT	3013 CARAMBOLA CIRCLE SOUTH	COCONUT CREEK, FL 33066
P/D	JOHN F MARTIN	410 LYNNE HYATT 3013 CARAMBOLA CIRCLES	COCONUT CREEK, FL 33066
D	RICHARD J. FINK	410 LYNNE HYATT 3013 CARAMBOLA CIRCLES	COCONUT CREEK, FL 33066
			5000003195905---4 -04/05/00--01002--008 ***1958.75 ***1958.75
			REINSTATEMENT 92-60 1 TS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Lynne Hyatt

Name

3013 Carambola Circle South

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

Coconut Creek, FL 33066

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

Lynne Hyatt

Date

2/24/00

REGISTERED AGENT MUST SIGN

11. This corporation owes 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:

Lynne Hyatt - LYNNE HYATT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
LYNNE HYATT, SECRETARY, DIRECTOR

2/24/00
Date

Daytime Phone #

CP2E081 (12/98)