PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
96 NOV 14 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 522862

1. Corporation Name

Windsor House Publishers, Inc.

Principal Place of Business / Mailing Address

7154 N. University Drive,
Suite 288
Ft. Lauderdale, FL 33321

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

REINSTATEMENT 95-96

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, if Applicable
9900 West Sample Road
Suite, Apt. #, etc.
City & State: Coral Springs, FL
Zip: 33065 Country: Broward

3. New Mailing Address, if Applicable
9900 West Sample Road
Suite, Apt. #, etc.
City & State: Coral Springs, FL
Zip: 33065 County: Broward

4. Date Incorporated or Qualified To Do Business in Florida
1/6/77

5. FEI Number
59-1415602
Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

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	Nathanson, Ted	603 NW 99th Terrace	Coral Springs, FL 33071
V	Nathanson, Judy S.	603 NW 99th Terrace	Coral Springs, FL 33071
S	Hotaling, Marie S.	Rt 3 Box 376	Old Town, FL 32680
			600002006036--8
			11/15/96--01072--011
			******8.75 ******8.75
			DB 11-14-96

8. Name and Address of Current Registered Agent

Marie S. Hotaling
Route 3 Box 376
Old Town, FL 32680

9. Name and Address of New Registered Agent

Name: Certified Paralegals, Inc.
Street Address (P.O. Box Number is Not Acceptable): 101 N. State Road 7
Suite, Apt. #, Etc.: Suite #5
City: Margate, FL Zip Code: 33063

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******75.00

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: Jack Kaplan as agent for Certified Paralegals, Inc.
REGISTERED AGENT MUST SIGN
Date: 11/13/96

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: Ted Nathanson, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: 11/13/96 Daytime Phone #: (954) 486-3900