

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

97 DEC -1 PM 1:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 683433

1. Corporation Name

FLORIDA COAST RESIDENTIAL & INVESTMENT  
PROPERTIES, INC.

Principal Place of Business

Mailing Address

4989 West Atlantic Ave.  
Delray Beach, FL 33445

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

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
PD	SHATZ, CHARLOTTE	6164 Springdale Way	Delray Bch., FL33484
DE	FAZIO, . BARBARA	6164 Springdale Way	Delray Bch., FL 33484

100002361461--2  
-12/02/97--01105--009  
\*\*\*\*165.00 \*\*\*\*165.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

\* SHATZ, ALEC

6164 Springdale Way  
Delray Beach, FL 33484

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date

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:

*Charlotte Shatz*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLOTTE  
SHATZ

Date

11-26-97

Daytime Phone #

561-498-9300

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**FLORIDA COAST  
RESIDENTIAL & INVESTMENT  
PROPERTIES, INC.  
4989 W. ATLANTIC AVE.  
DELRAY BEACH, FL 33445**

November 28, 1997

Mrs. Leslie Sellers  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: FLORIDA COAST R&I PROP., INC.  
ANNUAL REPORT

Dear Mrs. Sellers:

Pursuant to our phone conversation of a few days ago with reference to the above matter, you have requested that we give you an explanation for the delay in filing, which you will find herein.

I, ALEC SHATZ, am the Registered Agent for this Corporation, and most unfortunately I was taken ill the first of this past year. I had very serious surgery in April, and have been recuperating for many months until my Doctor discharged me just a few weeks ago. My wife, Charlotte Shatz, is President of this Firm; however, she was so involved in my care (as she almost lost me twice during my illness) and was most concerned with my welfare ... that most unfortunately, the business was set aside and the annual report was overlooked.

This Corporation has been in existence for many many years, and there is truly no excuse that I can offer other than my bout with serious illness.

Please find enclosed our check in the amount of \$165.00 which should reinstate our Corporation. May we express our sincere appreciation in advance for your kind understanding and co-operation. Thank you very much.

Very Truly Yours,



Alec Shatz  
Registered Agent