

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION  
FOR  
REINSTATEMENT**



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

**DOCUMENT # 723805**

1. Corporation Name

**TOWN HOUSE VILLAS CONDOMINIUM, INC. THE**

Principal Place of Business

**1413 NW 15 Ave**  
**4411 N 15TH AVE**  
**HOLLYWOOD FL 33020**  
**US**

Mailing Address

**P.O. Box 93**  
**4411 N 15TH AVE**  
**HOLLYWOOD FL 33020**  
**US DANIA FL 33004**

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

2. New Principal Office Address, If Applicable

**1413 NW 15 Ave**

Suite, Apt. #, etc.

**Hollywood**

City & State

**FL**

Zip

**33020**

Country

**US**

3. New Mailing Office Address, If Applicable

**P.O. Box 93**

Suite, Apt. #, etc.

City & State

**DANIA FL**

Zip

**33004**

Country

**US**

**REINSTATEMENT 97**

4. Date Incorporated or Qualified To Do Business in Florida

**07/05/1972**

5. FEI Number

**59-1450528**

Applied For

Not Applicable

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	<del>JACOBSEN, JOHN</del> <b>David Epstein</b>	<b>1825 N 15TH AVE</b> <b>1407</b>	<b>HOLLYWOOD FL</b>
TD	<del>ROWE, BERNICE W</del> <b>Cusolito, Anthony</b>	<b>4417 N 15TH AVE</b> <b>1413</b>	<b>HOLLYWOOD, FL 00000</b>
SD	<b>NISTICO, HELENE</b>	<b>1315 N 15TH AVE</b>	<b>HOLLYWOOD FL</b>
<del>SD</del>	<b>KRNBITCH, SOL</b>	<b>1403 N 15TH AVE</b>	<b>HOLLYWOOD FL</b>
<del>SD</del>	<del>DRAPER, PATRICIA</del>	<del>1820 N 15 AVENUE</del>	<del>HOLLYWOOD FL</del>
D	<b>ANASTASIA, EDWARD</b>	<b>1327 N 15TH AVE</b>	<b>HOLLYWOOD FL</b>

8. Name and Address of Current Registered Agent

**JACOBSEN, JOHN**  
**4326 N 14TH AVE**  
**HOLLYWOOD FL 33020**

9. Name and Address of New Registered Agent

Name

**David Epstein**

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

**1407 N. 15 Ave**

Suite, Apt. #, Etc.

**400002353464--3**

City

**Hollywood**

11/20/97

01097-024

\*\*\*236

State

**FL**

Zip Code

**33020**

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 **X David Epstein**  
REGISTERED AGENT MUST SIGN

Date **X 11/16/97**

11. This corporation owes or has paid 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: **David or John**  
**Anthony Cusolito - ANTHONY CUSOLITO** **X 11/16/97** **954-922-1608**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR