

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 725683

**FILED**  
**Oct 06, 2005**  
**Secretary of State**

**Entity Name:** MARGATE FLORIDA LODGE, INC. NO. 2463

**Current Principal Place of Business:**

5451 NW 15TH ST  
MARGATE, FL 330633719

**New Principal Place of Business:**

**Current Mailing Address:**

5451 NW 15TH ST  
MARGATE, FL 330633719

**New Mailing Address:**

**FEI Number:** 59-1556118      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

FUSANI, ROY  
5451 NW 15 ST.  
MARGATE, FL 33063      US

**Name and Address of New Registered Agent:**

WITKOWSKI, ROSE  
6332 CORAL LAKE DR  
MARGATE, FL 33063      US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROSE WITKOWSKI

10/06/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: ER      ( ) Delete  
Name: FUSANI, ROY  
Address: 5451 NW 51 ST.  
City-St-Zip: MARGATE, FL 33063

Title: TD      ( ) Delete  
Name: MAHER, JERRY  
Address: 7703 NW 18 CT.  
City-St-Zip: MARGATE, FL 33063

Title: TS      ( ) Delete  
Name: NEPA, PETER  
Address: 777 S FEDERAL HWY.  
City-St-Zip: POMPANO BEACH, FL 33062

Title: TR      (X) Delete  
Name: FALLS, PATRICIA  
Address: 1587 NW 65 AVE.  
City-St-Zip: MARGATE, FL 33063

Title: S      ( ) Delete  
Name: COMO, VINCENT  
Address: 6897 NW 1 CT.  
City-St-Zip: MARGATE, FL

Title: TD      ( ) Delete  
Name: ESPIRITU, CLIFFORD  
Address: 5984 NW 74 STREET  
City-St-Zip: PARKLAND, FL 33067

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ER      (X) Change ( ) Addition  
Name: WITKOWSKI, ROSE  
Address: 6332 CORAL LAKE DR  
City-St-Zip: MARGATE, FL 33063

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TR      (X) Change ( ) Addition  
Name: MAUK, ALAN  
Address: 141 PONCE DE LEON STREET  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSE WITKOWSKI

P

10/06/2005

Electronic Signature of Signing Officer or Director

Date