

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
16 MAR 30 AM 9:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 735005

1. Corporation Name

Cove Gardens Condominium Association, Inc.

2. Principal Office Address - No P.O. Box #

1240 S.E. 3rd Court

Suite, Apt. #, etc.

Apt. 14

City & State

Deerfield Beach, FL

Zip

33441

Country

USA

3. Mailing Office Address

506 S.W. Natura Avenue

Suite, Apt. #, etc.

City & State

Deerfield Beach, FL

Zip

33441

Country

USA

CR2E081 (11/10)

4. Date Incorporated or Qualified  
To Do Business in Florida

2/20/1976

5. FEI Number

59-1808695

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Mary Foster

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

506 S.W. Natura Avenue

Suite, Apt. #, Etc.

City

Deerfield Beach

State

FL

Zip Code

33441

000282700640  
03/30/16--01013--028 \*\*\$1.25

000282700640  
02/26/16--01025--020 \*\*\$36.25

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*Mary Foster*

REGISTERED AGENT MUST SIGN

Date 2-25-16

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PTD	Mary Foster	506 S.W. Natura Avenue	Deerfield Beach, FL 33441
VSD	George A. Patterson	1528 S.E. 12 Court	Deerfield Beach, FL 33441
D	Judy Teabout	1260 S.E. 3rd Court, #5	Deerfield Beach, FL 33441
Board Member	Florence Cochran	1261 S.E. 4 Street, #3	Deerfield Beach, FL 33441
ST	Danette Needham	1240 S.E. 3rd Court, #11	Deerfield Beach, FL 33441

MAR 30 2016

10. E-mail Address: mwbray@bellsouth.net

(To be used for future annual report notification)

11. 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. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

*George A. Patterson* GEORGE A. PATTERSON, V.P.

2/25/16

954-427-7592

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #