

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *Page 1 of 2*

APPLICATION  
FOR



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **742376**

1. Corporation Name

**GREENWAY LAKES SECTION THREE PROPERTY OWNERS' ASSOCIATION, INC.**

Principal Place of Business

1902 S.W. 124 PLACE  
MIAMI FL 33175  
US

Mailing Address

1902 S.W. 124 PLACE  
MIAMI FL 33175  
US

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

04/14/1978

5. FEI Number

65-0860810

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	RODRIGUEZ, TONY	1902 S.W. 124 PLACE	MIAMI FL 33175
VD	BARBERIS, LEE	1912 S.W. 124 PLACE	MIAMI FL 33175
S	GONZALEZ, VLMA	1922 SW 124TH PL	MIAMI FL 33175
T	DIAZ, ANA	2002 SW 124TH PL	MIAMI FL 33175

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-12/31/01--01085--022  
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8. Name and Address of Current Registered Agent

RODRIGUEZ, CRUZ A  
1902 S.W. 124 PLACE  
MIAMI FL 33175

9. Name and Address of New Registered Agent

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 of Cruz A. Rodriguez]*

REGISTERED AGENT MUST SIGN

Date

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., 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*[Signature of Tony Rodriguez]* 11-3-01 305/5321456

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10/26/2001

Florida Dept of State  
Division of Corporations  
Annual Report Reinstatement Section  
PO Box 6327  
Tallahassee FL 32314-6327

RE: UNIFORM BUSINESS REPORT DOC.# 742376  
GREENWAY LAKES HOMEONERS ASSOC.

To whom it may concern:

I just received a notice of corporation cancellation and immediately contacted your dept to inform you that I had not received the above mentioned Report, in fact there is another corporation registered to my address for which we did not receive it either.

I am the new register agent for the Homeowners Association and unfortunately was not even aware of when to expect this report to arrive, I was informed by your office it is sent out by February. We had some problems with receiving our mail and that may have been the reason.

Please accept my apologies for the late submittal of this information and hopefully this should not happen again now that I'm aware of when to expect it.

Enclosed please find the reinstatement form and the amount I was told to submit.

Thank you for your understanding in this matter.

Sincerely,

  
Cruz A. Rodriguez  
Register Agent, Director  
Greenway Lakes Homeowners Association Section Three