

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 FEB 11 AM 11:10

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 743651

1. Corporation Name

Lago Mar Colony Drainage Association, Inc.

000117850780  
02/12/08--01025--012 \*\*787.50

CR2E081 (12/07)

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

500 NW 127th Avenue

Suite, Apt. #, etc.

3. Mailing Office Address

500 NW 127th Avenue

Suite, Apt. #, etc.

City & State

Fort Lauderdale

Zip

33325

Country

US

City & State

Fort Lauderdale

Zip

33325

Country

US

4. Date Incorporated or Qualified  
To Do Business in Florida

7/20/1978

5. FEI Number  
59-2032069

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

Drake M. Batchelder

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

350 E. Las Olas Blvd.

Suite, Apt. #, Etc.

Suite 1600

City

Fort Lauderdale

State

FL

Zip Code

33301

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

*Drake M. Batchelder*

Date 2/11/2008

REGISTERED AGENT MUST SIGN

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
D	Azor, Jorge	1333 SW 175 Way	Pembroke Pines, FL 33029
D, P	Flautt, Jim	9711 SW 14 Place	Davie, FL 33324
D	Gentile, Paul	10376 SW 18 Street	Davie, FL 33324
D	McDonald, Charlie	1975 NW 171 Avenue	Pembroke Pines, FL 33028
D	Shahady, Tom	430 NW 131 Avenue	Plantation, FL 33325
VP	Batchelder, Drake M.	350 E. Las Olas Blvd., Suite 1600	Fort Lauderdale, FL 33301

10. 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 contained in Chapter 119, 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:

*Drake M. Batchelder*

Drake M. Batchelder

2/11/2008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #