

PS 1 8 2

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
05 JAN 31 PM 1:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT *11-05*



TR

01272005 REIN-NP CR2E099 (6/04)

4. FEI Number 59-1115957 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

DOCUMENT # 745011
 1. Entity Name
 ELDORADO COUNTRY CLUB APARTMENTS ASSOCIATION, INC.



Principal Place of Business
 160 N.E. 8TH. AVE.
 HALLANDALE, FL 33009

Mailing Address
 160 N.E. 8TH. AVE.
 7-B
 HALLANDALE, FL 33009

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country

6. Name and Address of Current Registered Agent
 BARIGLIO, MARYANNE
 160 N.E. 8TH AVENUE
 APT 7-A
 HALLANDALE, FL 33009

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
 FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CROOKFORD, LOUISE 160 NE 8TH AVENUE 22A HALLANDALE, FL 33009 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ARVALO, NANCY 170 NE 8TH AVENUE APT 18A HALLANDALE, FL 33009 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STANTON, BOB 160 NE 8TH AVENUE, APT 1-A HALLANDALE, FL 33009 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM CALVERT, ALICE 160 NE 8TH AVE APT 11B HALLANDALE, FL 33009 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM BARIGLIO, MARY ANN 160 NE 8TH AVENUE APT 7A HALLANDALE, FL 33009 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P REJEAN, MARTIN 160 NE 8TH AVENUE 26 B HALLANDALE, FL 33009 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

800046289238
02/10/05--01006--006 **122.50

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Maryanne Bariglio 1/27/05 (954) 981-0708
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
 MARYANNE BARIGLIO

1) 2 82

**ELDORADO COUNTRY CLUB APARTMENTS ASSOCIATION, INC.
160 N.E. 8TH AVENUE
HALLANDALE BEACH, FL 33009**

January 27, 2005

Department of State
Division of corporations
Post Office Box 6327
Tallahassee, FL 32314

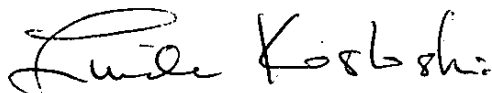
Re: Document Number 745011

To Whom It May Concern:

Please be advised that we are respectfully submitting the enclosed Corporation Reinstatement form. It has come to our attention that we did not receive a renewal form or notice for the past year and upon further research we have discovered that the corporation was deemed inactive.

Enclosed is a check in the amount of \$61.25 which represents the annual renewal fee. We are asking that you please abate the penalty assessed since we never received a renewal notice. If you have any question, please call (954) 981-0708. Thanking you in advance for your help in this matter.

Sincerely,



Linda Kosloski
Eldorado Country Club Apt. Assoc., Inc.

Enclosures