

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

03 MAR 27 AM 4:48

 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
--------------------------------------	---	--

DOCUMENT # 749720

1. Corporation Name

HAVERHILL GARDENS CONDOMINIUM ASSOCIATION, INC.

2. Principal Office Address

120 Sparrow Dr.

Suite, Apt. #, etc.

#108

City & State

Royal Palm Beach, FL

Zip

33411

Country

US

3. Mailing Office Address

2919-E. N. Military Trail

Suite, Apt. #, etc.

#360

City & State

West Palm Beach, FL

Zip

33409

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

11/16/1987

5. FEI Number

59-1928458

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐70 (b) Application fee required
for certificate of status

7. Name and Address of Current Registered Agent

Name

Jeff Deutch

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

7777 Glades Road

Suite, Apt. #, Etc.

Suite 300

City

Boca Raton

State

FL

Zip Code

33434

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

Date 3/26/03

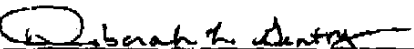
REGISTERED AGENT MUST SIGN

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PTS D	Don Hulse	2919-E. N. Military Trail, #360	West Palm Beach, FL 33409
VP D	Clifford Viner	2919-E. N. Military Trail, #360	West Palm Beach, FL 33409
AS D	Deborah Gentry	7777 W. Glades Rd., Ste. 300	Boca Raton, FL 33434

10. I certify that I am an officer or director of 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)(f), 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

3/26/03

Date

941-483-7000

Daytime Phone #

Division of Corporations

Page 1 of 2

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H03000098707 0)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0384

*originally sent
3-27-03*

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)521-1030

*please give
this fee date*

RESUBMIT

Please give original submission date as file date.

CORPORATION REINSTATEMENT

HAVERHILL GARDENS CONDOMINIUM ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02 3
Estimated Charge	\$1,216.25

RESUBMIT

Please give original submission date as file date.