

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

B. 1052

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 MAR 18 AM 10:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 750945

1. Corporation Name

LEDAWN CONDOMINIUM ASSOCIATION, INC.

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

1170 CHERRYSTONE CT

3. Mailing Office Address

1170 CHERRYSTONE COURT

Suite, Apt. #, etc.

NAPLES

Suite, Apt. #, etc.

City & State

FL

City & State

NAPLES

Zip

34102

Country

USA

Zip

FL

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

02/15/1980

5. FEI Number
010800018

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

KAREN L. WAGNER

Street Address (P.O. Box Number is Not Acceptable)
1170 CHERRYSTONE COURT

Suite, Apt. #, Etc.

City

NAPLES

State

FL

Zip Code

34102

☐ 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

Karen L. Wagner
REGISTERED AGENT MUST SIGN

Date **03/13/2009**

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
P/D	CORAL ROBINSON	450 THE KINGSWAY	TORONTO ONT M9A3W2
V/D	COLLEEN JOHNSON	611 LEONARD PKY	CRYSTAL LAKE IL 60014
S/T/D	KAREN L WAGNER	1170 CHERRYSTONE COURT	NAPLES FL 34102

000146157100
03/18/09--01035--021 **1715.00

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:

Karen L. Wagner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/2009

Date

239-774-7141

Daytime Phone #

3/19a

PG 9252

Florida Department of State

Division of Corporation

Enclosed you will find a check in the amount of \$1715.00 to reinstate our non profit corporation to active status.

After my husband read an article in the Naples newspaper last weekend, he asked about filing of a Corporate Resolution and I then contacted our attorney about this situation who then told me the filing had stopped back in 1985. I took over the secretary/treasurer position about 10 years ago and when the instructions and information was given to me from a prior officer, nothing was in the documents about this annual filing and fee.

I apologize for this not being done; however, I was not aware that is was a requirement of the association. I am asking that the reinstatement fee be forgiven because I have never received anything from the state indicating that this was necessary during my time as secretary/treasurer.

Thank you for listening to me and I hope that you understand my concerns. We are a small three townhouse association so money is hard to come by.

Sincerely,



Karen Wagner

LeDawn Condo Association

Secretary Treasurer