

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 DEC -3 AM 8:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 755814

1. Corporation Name

ROYAL POINCIANA GARDENS ASSOCIATION, INC.

600009560646
12/17/02--01063--002 **1347.50

REINSTATEMENT

2. Principal Office Address

2917 Rosewood Place

Suite, Apt. #, etc.

City & State

Sarasota, FL

Zip

34239

Country

USA

3. Mailing Office Address

P.O. Box 40114

Suite, Apt. #, etc.

City & State

Sarasota, FL

Zip

34242

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

1/9/81

5. FEI Number

14-1858263

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

FREDERICK OUSELEY

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

2917 Rosewood Place

Suite, Apt. #, Etc.

City

Sarasota

State

FL

Zip Code

34239

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

Frederick Ouseley
REGISTERED AGENT MUST SIGN

Date 12/02/02

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
PD	Frederick Ouseley	2917 Rosewood Place	Sarasota, FL 34239

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 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:

Frederick Ouseley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FREDERICK OUSELEY

12/02/02 (941) 349-3131
Date Daytime Phone #

CR2E081 (9/01)

B