

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2006 JUL 19 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 755892

1. Corporation Name

CORONADO COURT CONDOMINIUM ASSOCIATION, INC.

2. Principal Office Address

718 SE 46th Lane

3. Mailing Office Address

2930 Del Prado Blvd S

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite B

City & State

Cape Coral, FL

City & State

Cape Coral, FL

Zip
33904

Country
USA

Zip
33904

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

01/14/1981

5. FEI Number

592145787

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

CR2E081 (12/05)

7. Name and Address of Current Registered Agent

Name

Sorenson Realty, Inc.

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

2930 Del Prado Blvd, S

Suite, Apt. #, Etc.

Suite B

City

Cape Coral

State
FL

Zip Code
33904

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

Cathy J. Sorenson
REGISTERED AGENT MUST SIGN

Date 6/27/2006

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	Angel Carbonell	718 SE 46th Lane	Cape Coral, FL 33904
V	Joseph Ragusa	718 SE 46th Lane	Cape Coral, FL 33904
ST	Casimiro Menendez	718 SE 46th Lane	Cape Coral, FL 33904

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:

David R. Sorenson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/27/2006

Daytime Phone #

542-2640