

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 756120

1. Entity Name
THE VILLAS AT THE GATE CONDOMINIUM
ASSOCIATION, INC.



FILED

07 JAN 16 PM 5:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
5300 POWERLINE RD
#200A
FORT LAUDERDALE, FL 33309 US

Mailing Address
5300 POWERLINE RD
SUITE #200A
FORT LAUDERDALE, FL 33309 US

2. Principal Place of Business
C/O Benchmark Prop. Mgmt 7932 Wiles Road
Suite, Apt. #, etc.

3. Mailing Address
7932 Wiles Road
Suite, Apt. #, etc.

City & State
7932 Wile Road, Coral Springs FL
Zip Country
33067 Broward 33067 Broward



REINSTATEMENT

4. FEI Number
59-2231414
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MEYROWITZ, ANDREW
%DCLASSOC SERVICES
2035 HARDING STREET, SUITE #200
HOLLYWOOD, FL 33020

7. Name and Address of New Registered Agent

Name Robert KAYE & Associates, PA.
Street Address (P.O. Box Number is Not Acceptable)
6261 N.W. 6TH WAY, #103
City Ft Lauderdale FL Zip Code 33309

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

Robert Kaye, President

Signature (Typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

1-10-07

FILE NOW!!! FEE IS \$236.25
After January 1, 2007, Fee will be \$297.50

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE SD
NAME HILL, SANDRA J
STREET ADDRESS 5211 GATE LAKE ROAD
CITY-ST-ZIP TAMARAC, FL 33319 ☐ Delete

TITLE D
NAME MORRIS, DORIS
STREET ADDRESS 5303 GATE LAKE ROAD
CITY-ST-ZIP TAMARAC, FL 33319 ☐ Delete

TITLE
NAME BAUMAL, JEFF
STREET ADDRESS 5253 GATE LAKE ROAD
CITY-ST-ZIP TAMARAC, FL 33319 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
200082813372
12/28/06--01010--014 **236.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
200082813372
01/23/07--01020--018 **61.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
K. Eckel JAN 18 2007

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SANDRA J. HILL SECRETARY

12/19/06 954-258-6599
Date Daytime Phone #