

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

14 JUL -4 AM 2:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT #** 757281

1. Corporation Name

FoxChase West Property Owners Association, Inc.

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

24701 US Hwy 19 North

Suite, Apt. #, etc.

102

City & State

Clearwater, Fl.

Zip

33763

Country

USA

3. Mailing Office Address

24701 US Hwy 19 North

Suite, Apt. #, etc.

102

City & State

Clearwater, Fl.

Zip

33763

Country

USA

CR2E081 (11/10)

4. Date Incorporated or Qualified  
To Do Business in Florida

7-15-81

5. FEI Number

59-2107071

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 Browder Ameri-Tech Property Management, Inc.

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

24701 US Hwy 19 North

Suite, Apt. #, Etc.

102

City

Clearwater

State

FL

Zip Code

33763

700281960667  
07/03/14--01013--003 \*\*236.25

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 Browder*

REGISTERED AGENT MUST SIGN

Date 6/27/14

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
Pres	Matty Castellano	2101 FoxChase Blvd	Palm Harbor, Fl. 34652
Vice Pres	Jerry Tsikos	3300 Fox Chase Circle North	Palm Harbor, Fl. 34652
Dir	Sharon Cuevas	3277 FoxChase Circle North	Palm Harbor, Fl. 34652
Dir	Vicki Crowley	2135 Fox Chase Blvd	Palm Harbor, Fl. 34652
Dir	Deborah Buchner	3205 Fox Chase Circle North	Palm Harbor, Fl. 34652
Dir	Rafaela LaMorte	3259 Fox Chase Circle North	Palm Harbor, Fl. 34652

10. E-mail Address: kbrowder@ameritechmail.com

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

*Karen Browder*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/27/14 727-726-8000  
Date Daytime Phone #

R 6 7/8/14