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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

AM 4:44
27SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 758417

1. Corporation Name

HAVERHILL GARDENS WEST CONDOMINIUM ASSOCIATION, INC.

2. Principal Office Address

120 Sparrow Dr.

Suite, Apt. #, etc.

#108

City & State

Royal Palm Beach, FL

Zip

33411

Country

US

3. Mailing Office Address

2919-E. N. Military Trail

Suite, Apt. #, etc.

#360

City & State

West Palm Beach, FL

Zip

33409

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

11/16/1987

5. FEI Number

59-2160461

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

If checked, the corporation is required to file a certificate of status with the Department of State.

REINSTATEMENT 87-03

7. Name and Address of Current Registered Agent

Name

Jeffrey Deutch

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

7777 Glades Road

Suite, Apt. #, Etc.

Suite 300

City

Boca Raton

State

FL

Zip Code

33434

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0605 or 817.0605, F.S.

Signature of
Registered Agent

Date 3/26/03

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officer and/or Director	Street Address of Each Officer and/or Director	City / State / Zip
PTS D	Don Hulce	2919-E. N. Military Trail, #360	West Palm Beach, FL 33409
VP D	Clifford Viner	2919-E. N. Military Trail, #360	West Palm Beach, FL 33409
AS D	Deborah Gentry	7777 Glades Rd., Suite 300	Boca Raton, FL 33434

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 807 or 817, 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 807.0401 or 817.0401, 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)(d), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/03

Date

561-483-7000

Daytime Phone #

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2052
1/3

Division of Corporations

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 205-0384

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 521-1030

*Please give original
submission date
3-27-03
as per date*

RESUBMIT

*Please give original
submission date as file date.*

CORPORATION REINSTATEMENT**HAVERHILL GARDENS WEST CONDOMINIUM ASSOCIATION, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	92 03
Estimated Charge	\$1,216.25

RESUBMIT

**Please give original
submission date as file date.**