


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
08 DEC 19 AM 9:48

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 758836

1. Corporation Name

Ocean Royale Condominium Association

W08-55068

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

1595 HWY A1A

Suite, Apt. #, etc.

City & State

Satellite Beach, FL

Zip

32937

Country

USA

3. Mailing Office Address

283 Bell Tower Xing W

Suite, Apt. #, etc.

City & State

Kissimmee, FL

Zip

34759

Country

USA

REINSTATEMENT 06-08^{KS}

4. Date Incorporated or Qualified
To Do Business in Florida

06/19/1981

5. FEI Number

592102315

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

Stephen Murray

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

283 Bell Tower Xing W

Suite, Apt. #, Etc.

City

KISSIMMEE

State

FL

Zip Code

34759

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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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

[Signature]

REGISTERED AGENT MUST SIGN

Date 12-8-08

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
D	Maelinda Crawford	1595 HWY A1A #103	Satellite Beach, FL 32937
S	Stephen Murray	1595 HWY A1A #302	Satellite Beach, FL 32937
T	Cathy Frazier	1595 HWY A1A #303	Satellite Beach, FL 32937
D	Bhikhabha Patel	1595 HWY A1A #501	Satellite Beach, FL 32937
D	Ed Brooks	1595 HWY A1A #402	Satellite Beach, FL 32937
P	MARTY HINDSLEY	1595 HWY A1A #401	SATELLITE BEACH, FL

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:

Marty Hindsley - MARTY HINDSLEY 12/8/08 321-777-8313

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #