

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**99-02482**  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 JUN 21 PM 4:01

DOCUMENT # **762490**

**1. Corporation Name**

HALLANDALE COMMUNITY DEVELOPMENT CORPORATION

**2. Principal Office Address**

816 NW 1ST AVENUE

Suite, Apt. #, etc.

City & State

HALLANDALE BEACH, FL

Zip

33009

Country

USA

**3. Mailing Office Address**

SAME

Suite, Apt. #, etc.

City & State

SAME

Zip

SAME

Country

SAME

**4. Date Incorporated or Qualified  
To Do Business in Florida**

APRIL 23, 1993

**5. FEI Number**

59-2600394

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

TIMOTHY BURTON

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

641 NW 4TH COURT

Suite, Apt. #, Etc.

City

HALLANDALE BEACH

State

FL

Zip Code

33009

000005907600--0

-06/21/02--01068--001

\*\*\*\*254.00 \*\*\*\*263.75

**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

*Timothy Burton*

REGISTERED AGENT MUST SIGN

Date **JUNE 17, 2002**

**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
PD	TIMOTHY BURTON	641 NW 4TH COURT	HALLANDALE BEACH, FL 33009
STD	BRENDA WILLIAMS	16820 NW 20TH AVENUE	MIAMI, FL 33161
VPD	JOHN SAUNDERS	7520 NW 9TH STREET	PLANTATION, FL 33312
DIR	BRIAN J. HENDERSON	2802 HARWOOD STREET	TALLAHASSEE, FL 32301

**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 under section 119.07(3)(i), 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:**

*Timothy Burton*

TIMOTHY BURTON, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(954) 456-8401

JUNE 17, 2002

Daytime Phone #

CR2E081 (9/00)

Hallandale Community Development Corporation  
816 NW 1<sup>st</sup> Avenue  
Hallandale Beach, FL 33009

June 21, 2002

To Whom It May Concern:

We are in the process of reinstating our non-profit corporation. We have not received a Uniform Business Report for our corporation for the past two years. Please accept this letter as notification and please waive all penalties associated with our reinstatement.

Thank You,

A handwritten signature in black ink, appearing to read "Brian J. Henderson", with a long horizontal flourish extending to the right.

Brian J. Henderson, Director  
Hallandale Community Development Corporation