PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

96 DEC 30 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 770052

1 Corporation Name

WOMAN'S CLUB OF WILTON MANORS, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| ~~% EDWIN R. RUMIN~~ | ~~% EDWIN R. RUMIN~~ |
| 600 NORTHEAST 21ST. COURT | 600 NORTHEAST 21ST. COURT |
| WILTON MANORS FL 33305 | WILTON MANORS FL 33305 |

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

| 2. New Principal Office Address, If Applicable | | 3. New Mailing Office Address, If Applicable | |
|---|---|---|---|
| Suite, Apt #, etc. 600 Northeast 21 Ct. | | Suite, Apt. #, etc. 600 Northeast 21 Ct. | |
| City & State Wilton Manors, FL | | City & State Wilton Manors | |
| Zip 33305 | Country | Zip 33305 | Country USA |

4. Date Incorporated or Qualified To Do Business in Florida 08/31/1983

5. FEI Number 59-1104211 — Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

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

| Title(s) 1 | Name of Officers and/or Directors 2 | Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3 | City / State / Zip 4 |
|---|---|---|---|
| D | LEAVER, LOUOMA | 5201 NE 32ND AVE | FT LAUDERDALE FL |
| D | VENGROWSKY, LEE | 6000 NE 22ND WAY / #50 | FT LAUDERDALE FL |
| VP | THOMPSON, GWEN | 2012 NE 4 AVE. | WILTON MANORS FL |
| VP | HOUSTON, MARIAN | 2224 NE 19 AVE. | FORT LAUDERDALE FL |
| CS | NOLAN, SOPHIE | 671 SW 6ST., APT 401 | POMPANO BEACH FL |
| D | GARRO, BETTY | 119 NE 19TH CT / #G-111 | WITON MANORS FL |

8. Name and Address of Current Registered Agent

RUMIN, EDWARD R.
~~2500 N. FEDERAL HWY. #201~~
~~FT LAUDERDALE FL 33305~~

REINSTATEMENT 1996
A. Allan
12/30/96

9. Name and Address of New Registered Agent

Name Edward R. Rumin
Street Address (P.O. Box Number is Not Acceptable) 2720 E. Oakland Park Blvd.
Suite, Apt. #, Etc. 106
City Fort Lauderdale State FL Zip Code 33306

CR2E040 (7/96)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent — REGISTERED AGENT MUST SIGN Edward R. Rumin

500001[illegible]45--7
-01/09/97--01014--007
****236.25 ****236.25
(See other side for information on intangible tax.)

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

12 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: Louoma Leaver Pres. — 10/08/96 — 954-565-9495
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Louoma Leaver

0061149 AF