

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 770568

1. Corporation Name

BANYAN SPRINGS SOCIAL CLUB, INC.

Principal Place of Business

Mailing Address

10780 CEDAR POINT BLVD.
BOYNTON BEACH FL 33437

10780 CEDAR POINT BLVD.
BOYNTON BEACH FL 33437

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

2. New Principal Office Address, If Applicable

10780 Cedar Point Blvd

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

5016 Rosehill Dr Apt 2-101

Suite, Apt. #, etc.

City & State

Boynton Beach Fla

Zip

33437

Country

USA

City & State

Boynton Beach Fla

Zip

33437

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

10/04/1983

5. FEI Number

59-2209970

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	SONNEN, RITA	5032 ROSEHILL DR #3-105 5113 Pine Dr	BOYNTON BCH FL 33437
RS	GROSS, MARILYN	5032 ROSEHILL DRIVE #3-201	BOYNTON BEACH FL 33437
T	ZUCKER, JEROME	10113 MANGROVE DR #106 5016 Rosehill Dr 2-101	BOYNTON BEACH FL 33437
VP	BERKOWITZ, MARVIN	5113 PINE DRIVE 5016 Rosehill Dr 2-305	BOYNTON BEACH FL 33437
PD	SONNEN, RITA	5032 ROSEHILL DRIVE #3-105	BOYNTON BEACH FL
VP	BERKOWITZ, MARVIN	5113 PINE DR	BOYNTON BEACH FL 33437

8. Name and Address of Current Registered Agent

ZUCKER, JEROME
10113 MANGROVE DR #106
BOYNTON BEACH FL 33437

9. Name and Address of New Registered Agent

Name
TAMARA GINSBERG
Street Address (P.O. Box Number is Not Acceptable)
5016 Rosehill Dr 2-101
Suite, Apt. #, Etc.
2-101
City
Boynton Beach
State
FL
Zip Code
33437

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. or 617.0505, F.S.

Signature of
Registered Agent

Tamara Ginsberg
REGISTERED AGENT MUST SIGN

Date 10-18-03

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., 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:

Tamara Ginsberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-18-03

Date

Daytime Phone #

564-364-1267

CR2040 (7/03)

October 18, 2003

Gentlemen:

Re: Document #770568

The original form was mailed on 5/3/03 with our check, but was not signed properly.

Your notice of this to us was not received until the office opened after the summer. Therefore I am mailing the reinstatement form to you now with the correct signatures.

Very truly yours,

Banyan Springs Social Club, Inc.

Tamara Ginsberg, Agent