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(City/State/Zip/Phone #)

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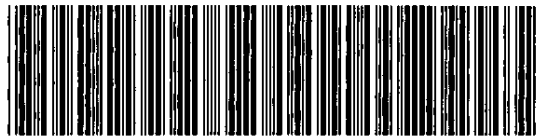
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 9, 2008

HENDERSON FRANKLIN  
BONITA BAY EXECUTIVE CENTER  
3451 BONITA BAY BLVD SUITE 206  
BONITA SPRINGS, FL 34134

SUBJECT: HOME-LIKE APARTMENTS, INC.  
Ref. Number: W08000001153

We have received your document for HOME-LIKE APARTMENTS, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes  
Regulatory Specialist II

Letter Number: 908A00001814

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Home-Like Apartments, Inc.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Neil Abrahamson

(Name of Person)

(Firm/Company)

4261 Bonita Beach Road

(Address)

Bonita Springs, FL 34134

(City/State and Zip code)

For further information concerning this matter, please call:

Neil Abrahamson

(Name of Person)

at ( 239 ) 947-9696

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. **HOME-LIKE APARTMENTS, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **Massachusetts**

(State or country under the law of which it is incorporated)

3. **042296850**

(FEI number, if applicable)

4. **02/05/1962**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **55 Craig Drive, P.O. Box 644, West Springfield, MA 01089**

(Principal office address)

**55 Craig Drive, P.O. Box 644, West Springfield, MA 01089**

(Current mailing address)

8. **Any and all lawful purpose for which a corporation may be incorporated.**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

**Neil Abrahamson**

Office Address:

**4261 Bonita Beach Road**

**Bonita Springs**

(City)

, Florida **34134**

(Zip code)

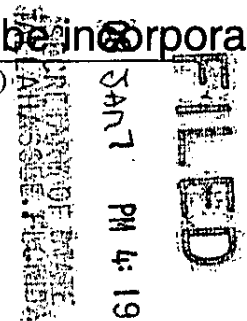
10. **Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

*Neil A Abrahamson*

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.



12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Neil Abrahamson

Address: 4261 Bonita Beach Road  
Bonita Springs, FL 34134

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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08 JAN 17 PM 4 18  
CLERK OF DISTRICT COURT  
FLORIDA 13th JUDICIAL CIRCUIT  
BONITA SPRINGS, FL

**B. OFFICERS**

President: Neil Abrahamson

Address: 4261 Bonita Beach Road  
Bonita Springs, FL 34134

Vice President: N/A

Address: \_\_\_\_\_

Secretary: Robert W. Bozenhard, Jr.

Address: 1252 Elm Street, West Springfield, MA 01089

Treasurer: Neil Abrahamson

Address: 4261 Bonita Beach Road, Bonita Springs, FL 34134

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Neil Abrahamson, President

(Typed or printed name and capacity of person signing application)



*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

William Francis Galvin  
Secretary of the  
Commonwealth

May 19, 2008

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

**HOME-LIKE APARTMENTS, INC.**

is a domestic corporation organized on **February 5, 1962**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

FILED  
08 JAN 17 PM 4:18  
SECRETARY OF STATE  
COMMONWEALTH OF MASSACHUSETTS



In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth