

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR 96-98
REINSTATEMENT



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

APPROVED
AND
FILED

98 FEB 19 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K84 959

1. Corporation Name

MIDWAY MANOR, INC.

Principal Place of Business

Mailing Address

5081 DUNN ROAD
FT. PIERCE, FL 34981

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

700 S.E. THIRD AVENUE

Suite, Apt. #, etc.

3RD FLOOR

City & State

FORT LAUDERDALE, FL

Zip

33316

Country
USA

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5/1/89

5. FEI Number

65-0116272

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	LEONA FUSS	800 N. FORK ROAD	STUART, FL. 34994
DST	IRWIN WEISER	700 S.E. THIRD AVENUE	FORT LAUDERDALE, FL 33316

REINSTATEMENT

96-98

A. Alan

2/19/98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

IRWIN WEISER

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

700 S.E. THIRD AVENUE, 3RD FLOOR

Suite, Apt. #, Etc.

City

FORT LAUDERDALE

State

FL

Zip Code

33316

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

Irwin A. Weiser

REGISTERED AGENT MUST SIGN

Date 2/13/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒

No ☐

(See other side for information
on intangible tax.)

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Irwin A. Weiser

IRWIN A. WEISER, SEC'Y.

2/13/98

Date

Daytime Phone #

CR25040 (1/98)