

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

DOCUMENT # M60488

1. Corporation Name

TEMPLE COURT GP/MF, INC.

Principal Place of Business

**C/O MARTIN FINE, ESQ.
HOLLAND & KNIGHT, 701 BRICKELL AVE. #3000
MIAMI FL 33131**

Mailing Address

**C/O MARTIN FINE, ESQ.
HOLLAND & KNIGHT, 701 BRICKELL AVE. #3000
MIAMI FL 33131**

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

701 Brickell Ave

Suite, Apt. #, etc.

Ste 3000

City & State

Miami, FL

Zip

33131

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

10/08/1987

5. FEI Number

65-0040715

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
P	FINE, MARTIN	HOLLAND & KNIGHT, 701 BRICKELL A	MIAMI FL 33131

**200002334372--4
-10/30/97--01108--003
****750.00 ****750.00**

8. Name and Address of Current Registered Agent

**FINE, ESQ., MARTIN
C/O HOLLAND & KNIGHT
701 BRICKELL AVENUE, SUITE 3000
MIAMI FL 33131**

9. Name and Address of New Registered Agent

Name
Intrastate Registered Agent Corporation
Street Address (P.O. Box Number is Not Acceptable)
701 Brickell Ave
Suite, Apt. #, Etc.
Ste 3000
City
Miami
State
FL
Zip Code
33131

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

Steven H. Hagans, Vice President

Date **10/28/97**

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)(j), 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

Martin Fine, President

10/28/97 305-374-8500

Date

Daytime Phone #

CP2040 (8/97)