PLEASE READ ALL INSTRUCTIONS BEFORE COMP

APPROVED
AND
FILED

05 APR 28 PM 3:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N02000003191

REINSTATEMENT 03-05 MRD

1. Corporation Name

Cypress Bay Estates Association, Inc.

2. Principal Office Address		**3.** Mailing Office Address	
1971 West McNab Road		1971 West McNab Road	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite #2		Suite #2	
City & State		City & State	
Pompano Beach, FL		Pompano Beach, FL	
Zip	Country	Zip	Country
33069	U.S.A.	33069	U.S.A.

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 90-0176238 ☐ Applied For ☐ Not Applicable

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

7. Name and Address of Current Registered Agent

Name: Stevens & Goldwyn, P.A.

800054667378
05/17/05--01027--003 **35.75

Street Address (P.O. Box Number is Not Acceptable): 3800 South Ocean Drive

Suite, Apt. #, Etc.: Suite #222

City: Hollywood | State: FL | Zip Code: 33019

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent _____ Date 4/21/05

REGISTERED AGENT MUST SIGN

CR2E081 (01/05)

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Christine Heenan	1321 S.E.3rd Ave.	Pompano Beach, FL 33060
V/D	Mark Packo	1361 S.E. 3rd Ave.	Pompano Beach, FL 33060
T/D	Dave Scharf	1367 S.E. 3rd Ave.	Pompano Beach, FL 33060
S/D	Jeanne Pemberton	1323 S.E. 3rd Ave.	Pompano Beach, FL 33060
D	David Annunziata	1371 S.E. 3rd Ave.	Pompano Beach, FL 33060

10. 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: _____ Christine Heenan (954) 941-6407

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date 4/19/2005 — Daytime Phone #