

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 # N02000007992**

1. Corporation Name

**BAY PARK GARDENS HOMEOWNERS' ASSOCIATION INC.**

Principal Place of Business

Mailing Address

200 CENTRAL AVENUE  
SUITE 2300  
ST. PETERSBURG FL 33701

200 CENTRAL AVENUE  
SUITE 2300  
ST. PETERSBURG FL 33701

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**REINSTATEMENT**



4/18/03 90438 047 61.25

4. Date Incorporated or Qualified To Do Business in Florida

10/17/2002

5. FEI Number

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
D	BOLDT, STEVEN W	8300 37TH AVENUE NORTH	ST. PETERSBURG FL 33701
D	LYNCH, PAUL L	8300 37TH AVENUE NORTH	ST. PETERSBURG FL 33701
D	MARTIN, JULIE	8300 37TH AVENUE NORTH	ST. PETERSBURG FL 33701
D	MAXHEIMER, THELMA	8319 37TH AVENUE NORTH	ST. PETERSBURG FL 33710
			700026138527 01/06/04--01045--004 **175.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CFRA LLC  
ONE HARBOUR PLACE  
777 SOUTH HARBOUR ISLAND BLVD.  
TAMPA FL 33602

Name  
Robin Roberson

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

8327 37th Avenue North

Suite, Apt. #, Etc.

City

St. Petersburg,

State

FL

Zip Code

33710

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

*Robin Roberson*

Robin Roberson REGISTERED AGENT MUST SIGN

Date 12-10-03

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:

*David [Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-1-03

Date

Daytime Phone #

CR2E040 (7/03)

Law Offices of  
DiVito & Higham, P. A.

JOHN J. DI VITO, RETIRED  
FREDERICK A. HIGHAM, JR.  
JOSEPH A. DI VITO

\_\_\_\_\_  
NICOLE FORBES STOWELL

4514 CENTRAL AVENUE  
ST. PETERSBURG, FLORIDA 33711-1041  
(727) 321-1201  
FAX (727) 321-5181

December 10, 2003

Ms. Tina Roberts  
Document Specialist  
Florida Department of State  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Bay Park Gardens Homeowners' Association, Inc.  
N02000007992

Dear Ms. Roberts:

I want to thank you for your personal phone call to me regarding our Association's filing being returned earlier in the year to the Registered Agent of Record notifying them that the filing had been rejected. However, as we discussed, the Registered Agent failed to notify us of the rejected filing.

I enclose the Application for Reinstatement, and would ask that you file the same at your earliest convenience.

Again, thank you for your attention to this matter.

Very truly yours,



Robin Roberson

Enclosures