PLEASE READ ALL-INSTRUCTIONS BEFORE COMPLETING THIS FORM

	RPORATI STATEM				DEPAR Secretar	y of S				20 KHO	1 !	
DOCUMENT # N02000008305 1. Corporation Name								20 04/30	000992 /0701003	25999 016 **	: 12 ∗420.	nn
POMPANO BEACH COMMUNITY REDEVELOPMENT AGENCY PLAT HOMEOWNERS' ASSOCIATION, INC.								<u>。</u> 强 4	1/25	100)	.00
·					office Address Atlantic Bivd.			REINS	TATEME	NT1/07/04	1-1	57
Suite, Apt. #, etc. Suite, Apt. #,					etc.				porated or Qualifled	10/29,	/200)2
City & State City & State												
Pompano Beach, FL P				Pompa	Pompano Beach, FL			5. FEI Number 20 – 8690015 Applied For Not Applicable				
^{zip} 33036	Country US			^{Zip} 33060		Coun	-	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additions for a Certification				
7. Name and Address of Current Registered Agent									,	<u> </u>		
Name Frederick C. Heidgerd, Esq. Street Address (P.O. Box Number is Not Acceptable) 600 W. Hillsboro Blvd. Suite, Apt. #, Etc. Suite 520 City					State Zip Code			The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.				
Deerfield Beach						FL	33441	<u> </u>				
8. I, being appointed the registered agent of the above named corporation amiliar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent Date 4/19/07												
9. Names	and Street A	ddresses	of Each Officer ar	d/or Director (F	orida nonpro	ofit corpo	orations must list at le	east 3 directors)				
Titles	Name of Officers and/or Directors				Street Address of Each Officer and/or Director					City / State / Zip		
PD	Lamar Fisher			u a	100 W. Atlantic			Bved.	Pompano	Beach,	FL'	3306
SD	George Brummer				100	W.	Atlantic	BY♥d.	Pompano	Beach,	FL	3306
D	Charlotte Burrie				100	W.	Atlantic	Blvd.	Pompano	Beach,	FL	3006
D	Rex Hardin				100	₩.	Atlantic	Blvd.	Pompano	Beach,	FL	3306
D	Pat Larkins				100	₩.	Atlantic	Blvd.	Pompano	Beach,	FL	3306
D	Kay N	nn		100	W.	Atlantic	Blvd.	Pompano	Beach,	FL	3306	
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 contained in Chapter 119, 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 Date Daytime Phone #												