

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **702745**

1. Corporation Name

The Commons At Maitland Center Condominium Association, Inc.

2. Principal Office Address

1059 Maitland Center Commons Blvd.

3. Mailing Office Address

1059 Maitland Center Commons Blvd.

Suite, Apt. #, etc.

Suite 250

Suite, Apt. #, etc.

Suite 250

City & State

Maitland, FL

City & State

Maitland, FL

Zip

32751

Country

USA

Zip

32751

Country

USA

FILED

06 MAR 29 11 9 49

CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

4/25/1984

5. FEI Number

592508436

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

Brian Cumming

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

1059 Maitland Center Commons Blvd.

Suite, Apt. #, Etc.

Suite 250

City

Maitland

State

FL

Zip Code

32751

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 3/24/06

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	Brian S. Cumming	1059 Maitland Center Commons Blvd.	Maitland, FL 32751
V/D	William J. Basten	1057 Maitland Center Commons Blvd.	Maitland, FL 32751
D	Art Ally	1055 Maitland Center Commons Blvd.	Maitland, FL 32751
D	Berry Walker	1053 Maitland Center Commons Blvd.	Maitland, FL 32751

REINSTATEMENT

04-06 B- 4/13/06

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04/10/06--01087--024 **358.75

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]

Brian S. Cumming

3/24/06

407-659-0553

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #