S BEFORE COMPLETING THIS FORM

Meist	Ź
i.r <i>9</i>	

561-865-3690

Daytime Phone #

		PLEA	ASE READ	ALL INSTRUCTI	ONS BEFORE		
	PORAT STATEM			FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS			
DOCU	JMENT	Γ# /	10300	000021	4		
Mizr	ner Co	untr	y Club W	omen's Asso	ociation, Inc.		
2. Principal Office Address 16102 Mizner Club Drive			lub Drive	3. Mailing Office Address 16102 Mizner Club Drive			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
Delray Beach FL			FL	City & State Delray Beach FL			
² 033446		Pal	m Beach	33446	Palm Beach		
				7. Name and A	ddress of Current Regist		
	Diane Nathan						
TG096 Brief Creek Drive							
	Suite, Apt.	#, Etc.			REM'S		
	fyair	2V E	Reach		4 eyer. V =		

SIGNATURE: X

FILED 06 JUN -6 AM 11: 47

CR2E081 (12/05)

4. Date Incorporated or Qualified To Do Business in Florida 01/08/2003

5/30/06

Date

Delray Beach FL		Delra	elray Beach FL			5. 57-1141931				\rightarrow	Applied For Not Applicable		
^z ₀ 3344	l 6	Palm Beach	33446	3	Palm Bea	ach	6. CERTIFICATE				Additio a Certifi	nal Fee	require
Signature of	7. Name and Address of Current Registered Agent Diane Nathan 06/21/06-01004-011 **183. Street Of Brief Creek Drive Suite, Apt. #, Etc. Delray Beach 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.												
Registered			GISTERED AGI	ENT MUST				Date	/37)/Ob			
9. Names	and Street A	uddresses of Each Officer and	/or Director (Flor	rida nonpro	fit corporations must	t list at leas	st 3 directors)						
Titles	<u></u>	Name of Officers and/or Directors	· · · · · · · · · · · · · · · · · · ·		Street Address Officer and/or					City / State /	Zip		
Pres.	Debo	orah B. Harri	s	1607	72 Brier C	Creek	< Drive	Delr	ay B	each	FL	334	146
Treas.	Dian	e Nathan		1609	6 Brier C	reek	Drive	Delr	ay Bo	each	FL:	334	46
V-Pres.	Patti	Yablon		1647	5 Braeburi	n Rid	ge Trail	Delr	ay B	each	FL	334	46
V-Pres.	Ferne	e Laffer		8114	1 Valhall	a Dr	ive	Delr	ay B	each	FL	334	46
												· · ·	
													
owed b	nstatement ap by the corpora	officer or director or the receive opplication, the reason for dissolution have been paid and the nature and accurate, and my significant or the control of	plution has been names of individu	eliminated, uals listed o	, the corporate name in this form do not ou	satisfies the	he requirements rexemption cont	of section	607.0401 6	or 617.0401	FS. fl	hat all fe	200

Deborah B. Harris

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

payent

Mizner Country Club Women's Association, Inc. 16102 Mizner Club Drive Delray Beach FL 33446

May 30, 2006

Department of State Division of Corporations P.O. Box 6327 Tallahassee FL 32314

Re: Reinstatement

Dear Sir or Madam:

I have enclosed your Corporation Reinstatement form for the Mizner Country Club Women's Association, Inc. We have no record of receiving annual report notices, so we request that the reinstatement fee be waived. We believe that it might be a result of the post office assigning a new address to the facility at which we receive mail.

A check for \$183.75 representing the filing fee for 2004, 2005 and 2006 is also enclosed.

Please review the enclosures and contact me if there is any additional information, forms or fees required in order to reinstate our association.

Thank you for your assistance.

Very truly yours,

Deborah B. Harris, President

(561) 865-3690