

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

09 OCT 19 AM 5:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N03000004795

1. Corporation Name

FRATERNAL ORDER OF POLICE  
HIGHLAND BEACH LODGE NO. 83, INC.

2. Principal Office Address - No P O Box #

3614 S. OCEAN BLVD.

3. Mailing Office Address

3614 S. OCEAN BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HIGHLAND BEACH, FL.

City & State

HIGHLAND BEACH, FL.

Zip

33487

Country

PALM BEACH

Zip

33487

Country

Palm Beach

4. Date Incorporated or Qualified  
To Do Business in Florida

6/6/2003

5. FEI Number

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

WALTER H. MESSICK, P.A.

Street Address (P.O. Box Number is Not Acceptable)  
1900 CORPORATE BLVD.

Suite, Apt. #, Etc.

SUITE 101 WEST

City

BOCA RATON

State

FL

Zip Code

33431

☒ 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

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

*Walter H. Messick*

Date 10-2-09

REGISTERED AGENT MUST SIGN

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	ROBERT DE VITO	3614 S. OCEAN BLVD.	HIGHLAND BEACH, FL 33487
VP	NEIL MAIORINO	3614 S. OCEAN BLVD.	HIGHLAND BEACH, FL 33487
S	LARRY BONHAM	3614 S. OCEAN BLVD.	HIGHLAND BEACH, FL 33487
T	DAVID L. SCHERER JR.	3614 S. OCEAN BLVD.	HIGHLAND BEACH, FL 33487
REINSTATEMENT RH			

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: *David L. Scherer Jr.* DAVID L. SCHERER JR., Treasurer

10/15/09

561-266-5800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #