

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 FEB 22 AM 7:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT *06-08*

DOCUMENT # **N04000009756**

1. Corporation Name

**LAKWOOD VILLAGE SECTION 11 RESIDENTS
ASSOC., INC.**

2. Principal Office Address - No P.O. Box #

**DIANA MOORE
BCH Management Group, Inc**

Suite, Apt. #, etc.

1840 Boy Scout Dr, STE B

City & State

Fort Myers, FL

Zip

33907

Country

LEE

3. Mailing Office Address

BCH Management Group, Inc

Suite, Apt. #, etc.

1840 Boy Scout Dr, STE B

City & State

Fort MYERS, FL

Zip

33907

Country

LEE

CR2E081 (1/07)

4. Date Incorporated or Qualified
To Do Business in Florida

10/15/04

5. FEI Number

801571053

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

DIANA MOORE / BCH Management Group, Inc

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

1840 Boy Scout Drive

Suite, Apt. #, Etc.

B

City

Fort Myers

State

FL

Zip Code

33907

☐ 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

Diana Moore

REGISTERED AGENT MUST SIGN

Date

11/01/2007

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
PD	Beto Rostamian	847 SAN Remo DR	Weston, FL 33326
VPD	Julio PEREZ, SR.	8536 BECKMAN DR	MIRAMAR, FL 33025
STD	MARY WALLACE	540 Hickory Dr	Greenburg, PA 15601

200112010662
11/05/07--01050--016 **297.50

200112010662
03/05/08--01017--006 **70.00

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:

Mary Wallace
Diana Moore

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/25/08
11/01/07 239-274-6801

Daytime Phone #

2/25