

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

09 JAN -9 PM 2: 09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N04035**

1. Corporation Name

**Friends of  
Secret Woods, Inc.**

**REINSTATEMENT 08-09**

CR2E081 (12/08)

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

**2701 W. State Road 84**

3. Mailing Office Address

**2701 W. State Road 84**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Dania Beach, FL**

City & State

**Dania Beach, FL**

Zip

**33312**

Country

**US**

Zip

**33312**

Country

**US**

4. Date Incorporated or Qualified  
To Do Business in Florida

**07/05/1984**

5. FEI Number

**65-0407337**

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

**Kay Taylor**

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

**5110 SW 196 LN**

Suite, Apt. #, Etc.

City

**Southwest Ranches**

State

**FL**

Zip Code

**33332**

☐ 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

**Kay TAYLOR**

Date **1/6/09**

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
Pres.	Kay Taylor	5110 SW 196 LN.	Southwest Ranches, FL. 33332
V. Pres	Monica Baxter	6420 Roosevelt St.	Hollywood, FL. 33024
Trea.	Kirk Scott	5620 SW 88th Ave.	Cooper City, FL. 33328
Sec.	Susan Gunther	2409 E. Las Olas Blvd.	Ft. Lauderdale, FL. 33301
	<b>07/11/16</b>		<b>700140968077</b>
			<b>01/16/09--01016--017 **297.50</b>

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:

**KAY TAYLOR**

1/6/09

954-514-1653

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #