


2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N05000000669		
1. Entity Name MIZNER PLACE AT WESTON TOWN CENTER OWNERS ASSOCIATION, INC.		

Principal Place of Business 3015 N OCEAN BLVD STE 121 FT LAUDERDALE, FL 33308	Mailing Address 3015 N OCEAN BLVD STE 121 FT LAUDERDALE, FL 33308
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2. Principal Place of Business - No P.O. Box # 1775 Bonaventure Blvd	3. Mailing Address 1646 Racquet Club Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Weston, FL	City & State Weston, FL
Zip 33326	Zip 33326
Country USA	Country USA

6. Name and Address of Current Registered Agent GREENSPOON, MARDER, HIRSCHFELD, RAFKIN, ROSS & BERGER, P.A. 100 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$61.25
After January 1, 2009, Fee will be \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD OTTINO, J.P. III 3015 N OCEAN BLVD STE 121 FT LAUDERDALE, FL 33308 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FOSTER, REBECCA 3015 N OCEAN BLVD STE 121 FT LAUDERDALE, FL 33308 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FEIRSTEIN, JANICE 3015 N OCEAN BLVD STE 121 FT LAUDERDALE, FL 33308 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
Signature and typed or printed name of signing officer or director

FILED
08 NOV -5 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 08

4. FEI Number
APPLIED FOR 30-2038276
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

10-22-08 REINSTATEMENT 08

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