

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

1052

**DOCUMENT # N05000007667**

1. Entity Name  
**AURORA GARDENS CONDOMINIUM ASSOCIATION, INC.**



FILED

07 FEB 28 PM 5:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**630 NE 13TH AVE.  
FT. LAUDERDALE, FL 33304**

Mailing Address  
**630 NE 13TH AVE.  
FT. LAUDERDALE, FL 33304**

*[Handwritten signature]*



**REINSTATEMENT 06-07**

2. Principal Place of Business - No P.O. Box #  
**616 SE 20TH AVE**

3. Mailing Address  
**616 SE 20TH AVE**

Suite, Apt. #, etc.

City & State  
**DEERFIELD BEACH, FL**

City & State  
**DEERFIELD BEACH, FL**

Zip  
**33441**

Country  
**BROWARD**

Zip  
**33441**

Country  
**BROWARD**

4. FEI Number  
**Applied For**

Applied For ☒ Not Applicable ☐

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

6. Name and Address of Current Registered Agent

**ZINGG, LEONARDO Q  
630 NE 13TH AVE.  
FT. LAUDERDALE, FL 33304**

7. Name and Address of New Registered Agent

Name  
**HARRY SOLOWSKY**

Street Address (P.O. Box Number is Not Acceptable)  
**333 SE 20TH AVE**

City  
**DEERFIELD BEACH**

FL **FL**

Zip Code  
**33441**

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]* DATE **2/21/07**

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

**FILE NOW!!! FEE IS \$297.50**

**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 ZINGG, LEONARDO R 630 NE 13TH AVE. FT. LAUDERDALE, FL 33304 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAVID LUCCHESI 616 SE 20TH AVE DEERFIELD Bch, FL 33441 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ZINGG, IRENE A 630 NE 13TH AVE. FT. LAUDERDALE, FL 33304 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD JOSIE CALLARI 616 SE 20TH AVE DEERFIELD Bch, FL 33441 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERNARD, MARIO 4980 SW 52ND ST. DAVIE, FL 33314 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOLESZAW KAMINSKI 616 SE 20TH AVE DEERFIELD Bch, FL 33441 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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	<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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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]* DATE **2/21/07**

**President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2052

**AURORA GARDENS  
CONDOMINIUM ASSOCIATION INC.  
616 S.E. 20<sup>TH</sup> AVENUE  
DEERFIELD BEACH, FLORIDA 33441**

February 21, 2007

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

Attention: Kathy Ashton  
Document Specialist

Ref. Number: N05000007667

Subject: AURORA GARDENS CONDOMINIUM ASSOCIATION INC.

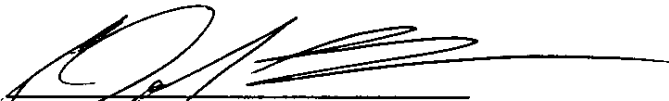
On February 21, 2007 correspondence was received from the Division of Corporation requiring additional information on the reinstatement of the above state corporation.

This is a request for waiver of the reinstatement fee. The Condominium was turned over to the owners from the builder, Leonardo Q. Zingg in January of 2006. The newly elected Board of Directors was not made aware by Mr. Zingg to file the changes to the corporation documents.

Submitted with this request is the reinstatement form signed by an officer of the corporation and listing the new Registered Agent and officers of the corporation.

Thank you for your assistance in this matter.

Sincerely



David Lucchese  
President/Director  
Aurora Gardens  
Condominium Association Inc.