PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 182

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 OCT 28 AM 8:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N08156

1. Corporation Name

GARDENS IN THE GROVE-2 CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
7370 ORANGEWOOD LN BOCA RATON FL 33433	C/O PRIME MANAGMENT GROUP 6300 PARK OF COMMERCE BLVD BOCA RATON FL 33487

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

05-7-02 90358 003 6125

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: 03/14/1985

5. FEI Number 59-2502993 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	NISSENBAUM, ALVIN	7370 ORANGEWOOD LANE ~~#105~~ #106	BOCA RATON FL 33433
TD STO	TORCH, REUBEN	7370 ORANGEWOOD LANE #208	BOCA RATON FL 33433
~~VPD~~	~~LEVINE, L. ANDREW~~	~~7370 ORANGEWOOD LANE #302~~	~~BOCA RATON FL 33433~~
D	NISSENBAUM, EILEEN	7370 ORANGEWOOD LANE #106	BOCA RATON FL 33433

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
SWATT, MYRON I. 6300 PARK OF COMMERCE BOULEVARD BOCA RATON FL 33487	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State FL / Zip Code

CR2E040 (8/02)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent SIGNATURE REQUIRED Date 10/23/02
REGISTERED AGENT MUST SIGN

11. 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 under section 119.07(3)(i), 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: SIGNATURE REQUIRED 10-24-02 561-487-3796
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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GARDENS IN THE GROVE II CONDOMINIUM ASSOCIATION, INC.

C/O PRIME MANAGEMENT GROUP, INC.
6300 Park of Commerce Blvd.
Boca Raton, FL 33487

October 22, 2002,

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

Subject: Gardens in the Grove II Condominium Association, Inc.

Reference: N08156

Gentlemen:

We mailed our original uniform business report with a check in the amount of $61.25 around the end of March.

We received a letter from you dated May 14, 2002 stating that we were required to have at least 3 directors. We only had two. A copy of your letter is enclosed.

You cashed our check #10739 dated 3/21/02. It cleared our bank on May 16, 2002.

We then filled out a new uniform business report showing three directors and mailed it to you around the first week of August. Evidently this report was lost in the mail. A copy of this report is enclosed.

We contacted your department today and we were advised to send a new form along with this letter.

Sincerely,

Reuben Torch

Reuben Torch, Secretary
Gardens in the Grove II
Enclosures