

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

97 MAY 23 AM 8:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N09013

1. Corporation Name

RENTSCHLER PARK CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

~~Suite 55, 12934 Kenwood Lane SW~~ ~~c/o James H. McConnell~~
~~Fort Myers, Florida 33907~~

REINSTATEMENT 87-97

G. Alan
5/23/97

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

2. New Principal Office Address, If Applicable
c/o FAYE B. JOHNSON

3. New Mailing Office Address, If Applicable
c/o FAYE B. JOHNSON

4. Date Incorporated or Qualified
To Do Business in Florida 5/1/85

Suite, Apt. #, etc.
18275 Deep Passage Lane

Suite, Apt. #, etc.
18275 Deep Passage Lane

5. FEI Number
Applied for
Applied For
Not Applicable

City & State
Ft. Myers Beach, FL

City & State
Ft. Myers Beach, FL

Zip Country
33931 USA

Zip Country
33931 USA

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
PD	NATHAN G. PATCH	220 Orange Grove	Palm Beach, Florida 33480
VD	DAVID L. JOHNSON	18275 Deep Passage Lane	Ft. Myers Beach, FL 33931
STD	FAYE B. JOHNSON	18275 Deep Passage Lane	Ft. Myers Beach, FL 33931
AS	MANLEY P. CALDWELL, JR.	324 Royal Palm Way	Palm Beach, FL 33480
			3300002194943-0 -05/29/97--01076--008 ****848.75 ****848.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

JAMES H. McCONNELL
12934 Kenwood Lane SW, Suite 55
Ft. Myers, Florida 33907

Name
MANLEY P. CALDWELL, JR.
Street Address (P.O. Box Number is Not Acceptable)
324 Royal Palm Way, Suite 300
Suite, Apt. #, Etc.
City
Palm Beach
State
FL
Zip Code
33480

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.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 5/5/97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941
5/5/97 466-3034
Date Daytime Phone #

CR2E040 (12/96)