PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
97 NOV 26 PM 3:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **N24565**

1. Corporation Name

THE HAMPTONS AT MAPLEWOOD HOMEOWNERS ASSOCIATIO N, INC.

Principal Place of Business	Mailing Address
P.O. BOX 8143 JUPITER FL ~~33468-7007~~ US	P.O. BOX 8143 JUPITER FL ~~33468-7007~~ US

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

REINSTATEMENT 97 aw

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 33468-8143 Country	Zip 33468-8143 Country

4. Date Incorporated or Qualified To Do Business in Florida: 01/29/1988

5. FEI Number: 65-0023662 — 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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
~~P~~D	LITINSKI, GEORGE	136 SOUTH HAMPTON DRIVE	JUPITER FL 33458
~~P~~TD	TARGETT, TERRY	177 SOUTH HAMPTON DRIVE	JUPITER FL 33458
D	~~LARSEN, TOM~~ Marshall Peg	~~204 SUSSEX CIRCLE~~ 250 Hampton Place.	~~JUPITER FL 33458~~ Jupiter FL 33458
D	~~SAHNGER, JAMES~~	~~242 HAMPTON PLACE~~	~~JUPITER FL 33458~~
D	GODFREY, CHARLIE	215 S. HAMPTON DR.	JUPITER, FL 33458
PD	WILNER, GLEN	205 HAMPTON PL.	JUPITER, FL 33458

8. Name and Address of Current Registered Agent

SCHWIND, GEORGE
ST. JOHN, KING & DICKER
500 AUSTRALIAN AVE. SUITE 600
WEST PALM BEACH FL 33401

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City | State FL | Zip Code

300002362288--7
-12/03/97--01089--021
****245.00 ****245.00

CR2E040 (8/97)

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 George Schwind of St John Dicker Caplan Date 11/5/97

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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] Director Oct. 28, 1997 561-743-7626

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #