

APPLICATION
FOR



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

DOCUMENT # **N27998**

1. Corporation Name

DURR'S HOMEOWNER ASSOCIATION INC.

Principal Place of Business

Mailing Address

**713 N.W. 19th Ave
C/O GALE MARTIN
FT. LAUDERDALE, FL 33311**

**713 NW 19th Ave
C/O GALE MARTIN
FT. LAUDERDALE, FL 33311**

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

2. New Principal Office Address, If Applicable
1801 East Colonial Drive

Suite, Apt. #, etc.

Suite 107

City & State

Orlando, FL

Zip

32803

Country

USA

3. New Mailing Office Address, If Applicable

1801 East Colonial Dr.

Suite, Apt. #, etc.

Suite 107

City & State

Orlando, FL

Zip

32803

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

8/22/1988

5. FEI Number

N/A

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	Hinton, Earl Walter	713 NW 19 th Ave	Ft. Lauderdale, FL
VPD	Dykes, Essie	812 NW 19 th Ave	Ft. Lauderdale, FL
SD	Essie, Thomas	1721 N.W. 7 th Pl	Ft. Lauderdale, FL
DS	Watts, Terri	729 NW 19 th Terr.	Ft. Lauderdale, FL

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DD-01 UBR

8. Name and Address of Current Registered Agent

**Martin, Gale
1801 East Colonial Drive
Suite 107
Orlando, FL 32803**

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

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

Hale Mark

REGISTERED AGENT MUST SIGN

Date

4/2/01

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:

Earl Hinton Walter Earl Hinton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

954-768-9883
Daytime Phone #

04/13/01

Robinson Accounting of America

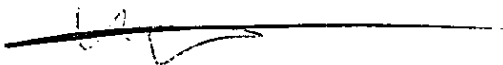
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

To Whom It May Concern,

~~This letter is to inform that Durr's Homeowner Association Inc.,~~ has
relocated. The named Corporation did not receive a Annual Corporate Report. Due
to these circumstances we are asking that you abate the reinstatement fees.

Your consideration concerning this matter is greatly appreciated.

Cordially yours,


Maurice Robinson
Robinson Accounting of America Inc.