PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE APPLICATION Sandra B. Mortham **FOR** Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 98 DEC -7 PM 2: 42 DOCUMENT # N30774 1. Corporation Name SECRETARY OF STATE ATTAHASSEE FLORIDA DDOO2709765----12/11/98--01022--008 NATIONAL ASSOCIATION OF OFFICE AND INDUSTRIAL P ARKS OF FLORIDA, INC. ****236.25 Principal Place of Business Mailing Address ****236.25 2400 W. CYPRESS CREEK_RD. 2400 W. CYPRESS CREEK RD. SUITE 100 SUITE 100 FT. LAUDERBALE FL 33309 FT. LAUDERDALE FL 33309 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 4509 George RD 3. New Mailing Office Address, If Applicable 450 9 GEOKEE KD Date Incorporated or Qualified To Do Business in Florida 4509 02/20/1989 5. FEI Number AMPA Applied For NOT APPLICABLE Not Applicable \$8.75 Additional Fee require for a Certificate of Status CERTIFICATE OF STATUS DESIRED [7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers and/or Directors City / State / Zip Title(s) هم د 1065 RAINER DRIVE !!! N. DRANGE AVE Ð SMITH, WILLIAM **V**PT KREISER, GAR D DUNCAN, RONNIE E. 2295 CORPORATE BLVD, NW #125 **BOCA RATON FL** LINING, JOHN H-ONE INDEPENDENT DR: #2401 IACKSONVILLE FL 32202 ₹PD DELORENZO, LYNN R. 8751 W: BROWARD BLVD 100 PLANTATION FL 1200 S. PINE ISLAND FA 6200 COURTNEY CAMPBELL CAUSEWAY, 501 E. Kennedy BUA 1700 KOEHLER, DEBRA-F TAMPA FL TAMPA EL Rhea Lau <u>a 9</u> Benjamin C+ #120 at TAMPL FL DAYID homas 5910 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent GANG, NENA Street Address (P.O. Box Number is Not Acceptable) 4509 GEORGE RD Suite, Apt. #, Etc. **TAMPA FL 33634** City State | 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 REQUIRED REGISTERED AGENT MUST SIGN This corporation owes or has paid the current year No 🔀 Intangible Personal Property tax due June 30. Yes L 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 filling 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.
