

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

09/10/02

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Kathleen Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

00 SEP 21 AM 9:48

SECRETARY OF STATE
 TALLAHASSEE FLORIDA

DOCUMENT # N34415

1. Corporation Name

WINDSOR SQUARE CONDOMINIUM ASSOCIATION, INC.

2. Principal Office Address

3. Mailing Office Address

917 N.E. 3RD Street 917 N.E. 3RD Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

FORT LAUDERDALE, FL

FT. LAUDERDALE FLORIDA

Zip

Country

Zip

Country

33301

USA

33301

USA

4. Date Incorporated or Qualified
 To Do Business in Florida

5. FEI Number

05-0193189

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

2075 Additional Fee required
 for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

LAURA P. SEDLAK

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

917 N.E. 3RD ST.

Suite, Apt. #, Etc.

300003416053-8

-10/06/00--01005--013

****183.75 ****183.75

City

FORT LAUDERDALE

State

FL

Zip Code

33301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
 Registered Agent

Laura P. Sedlak

REGISTERED AGENT MUST SIGN

Date

9-5-00

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	JON HOWARD	917 NE 3RD ST. FT. LAUDERDALE FL 33301	Ft. Land FL 33301
D	BART SAVAGE	917 NE 3RD ST. FT. LAUDERDALE FL 33301	Ft. Land FL 33301
D	LAURA HOGK	917 NE 3RD ST. FT. LAUDERDALE FL 33301	Ft. Land FL 33301

KE

10. 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:

Jon Howard JON HOWARD

9-5-00

Date

954-764-3733
 Daytime Phone #

CR2E081 (9/99)

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WINDSOR SQUARE CONDOMINIUM ASSOCIATION, INC.
917 NE 3RD Street * Fort Lauderdale, FL 33301

September 5, 2000

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

RE: WINDSOR SQUARE CONDOMINIUM ASSOCIATION, INC.
DOCUMENT #N34415

Dear ladies:

Enclosed you will please find a Reinstatement Form, along with our check in the amount of \$183.75. Our condominium association has neglected to renew this corporation for the past couple of years. We have been under some unforeseen circumstances inasmuch as the turnover in directors has been ongoing. Several of the tenants have moved, some have resigned and some just have not been in charge of the administration of the association for the proper follow up. We now have officers who have indicated their longstanding interest in staying on the board.

I respectfully request that you reinstate our condominium and please waive any penalties or additional fees that may be required.

Please forward any requests or responses to my attention at the address listed above. Thanks you for your attention to this matter.

Respectfully,


Laura Sedlak Hogle
Treasurer

98 Reports Returned by P.O. 