

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

12 OCT 19 PM 12:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N36765**

1. Corporation Name

SUMMERLIN PARK SOUTH OWNER ASSOCIATION,
INC.

2. Principal Office Address - No P.O. Box #
13861 PLANTATION ROAD

3. Mailing Office Address
13861 PLANTATION ROAD

Suite, Apt #, etc.
SUITE 101

Suite, Apt. #, etc
SUITE 101

City & State
FORT MYERS, FL

City & State
FORT MYERS, FL

Zip Country
33912 USA

Zip Country
33912 USA

93-12

CR2E081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida 02/23/1990

5. FEI Number
650268925

Applied For
 Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
WILLIAM P. SOLL

Street Address (P.O. Box Number is Not Acceptable)
13861 PLANTATION ROAD

Suite, Apt #, Etc
SUITE 101

City
FORT MYERS

State Zip Code
FL 33912

300241002703

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

William P. Soll

Date 10/18/2012

Date

REGISTERED AGENT MUST SIGN

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
P/D	HARWIN, BILL	4371 VERONICA S SHOEMAKER BLVD.	FORT MYERS, FL 33916
V/D	STEVENS, DOUGLAS	15721 NEW HAMPSHIRE COURT	FORT MYERS, FL 33908
S/D	LARSON, DEAN	15620 NEW HAMPSHIRE COURT	FORT MYERS, FL 33908
T/D	AOUCHICHE, RACHID	15640 NEW HAMPSHIRE COURT	FORT MYERS, FL 33908

OCT 19 2012

S. PRATHI

10. E-mail Address: bsoll@delawarecorp.comcastbiz.net

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

SIGNATURE:

Rachid Aouchiche
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/18/2012

Date

(239) 994-8267

Daytime Phone #



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 383954 4218B

AUTHORIZATION :

COST LIMIT : \$ 1400

Spudleman

ORDER DATE : October 17, 2012

ORDER TIME : 10:07 AM

ORDER NO. : 383954-005

CUSTOMER NO: 4218B

DOMESTIC FILINGS

NAME: SUMMERLIN PARK SOUTH OWNER ASSOCIATION, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

RECEIVED
DEPARTMENT OF STATE
12 OCT 19 AM 11:52

CONTACT PERSON: Harry B. Davis - Ext# 2926

EXAMINER'S INITIALS _____