

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

99 JAN -6 PM 4:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N48134

1. Corporation Name

ARIETTA LANDINGS HOME OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

~~506 SHALISA BLVD~~
AUBURNDALE FL 33823
US~~506 SHALISA BLVD~~
AUBURNDALE FL 33823
US

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

2. New Principal Office Address, If Applicable

517 SHALISA BLVD

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

517 SHALISA BLVD

Suite, Apt. #, etc.

City & State

AUBURNDALE FL

Zip

33823

Country

US

City & State

AUBURNDALE FL

Zip

33823

Country

US

REINSTATEMENT 98

4. Date Incorporated or Qualified
To Do Business in Florida

03/31/1992

5. FEI Number

NOT APPLICABLE

Applied For

☒ Not Applicable6. 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/D	MCCARTHY, TERESA	614 SHALISA BLVD	AUBURNDALE FL 33823
P/D	LOMBARDI, ANNE	517 SHALISA BLVD	AUBURNDALE FL 33823
T/D	BERGFELD, GENE R	510 SHALISA BLVD	AUBURNDALE FL 33823
T/D	GRAY, THOMAS	515 SHALISA BLVD	AUBURNDALE FL 33823
S/D	SIMS, ANGEL	506 SHALISA BLVD	AUBURNDALE FL 33823
S/D	SULLIVAN, BELINDA	524 SHALISA BLVD	AUBURNDALE FL 33823
S/D	SIMS, DAVID	506 SHALISA BLVD	AUBURNDALE FL 33823
			400002733604--5
			-01/07/99--01081--011
			****236.25 ****236.25

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SIMS, DAVID
506 SHALISA BLVD
AUBURNDALE FL 33823-9668

Ann

Name

Anne Lombardi

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

517 Shalisa Blvd

Suite, Apt. #, Etc.

City

Auburndale

State

FL

Zip Code

33823

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

Anne Lombardi

REGISTERED AGENT MUST SIGN

Date

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:

Anne Lombardi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12-31-98

Daytime Phone #

941-967-8035

006671 AF

CONSUMER COUNSELING SERVICES, INC.

Principal Place of Business

2180 N.W. 18TH AVENUE
SUITE #A-6
POMPANO BEACH FL 33069

Mailing Address

2180 N.W. 18TH AVENUE
SUITE #A-6
POMPANO BEACH FL 33069

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2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

00/11/1992

REINSTATEMENT 98