

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 31 PM 5:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # N93000000890**

**1. Corporation Name**

Ocean Breeze Park West Tenants Association, Inc.  
101 11th Street  
Marathon, FL 33050

REINSTATEMENT 99-03

000024339850  
10/31/03--01075--018 \*\*490.00

**2. Principal Office Address**

101 11th Street

**3. Mailing Office Address**

101 11th Street

**Suite, Apt. #, etc.**

Lot 4

**Suite, Apt. #, etc.**

Lot 4

**City & State**

Marathon, Florida

**City & State**

Marathon, Florida

**Zip**

33050

**Country**

USA

**Zip**

33050

**Country**

USA

**4. Date Incorporated or Qualified  
To Do Business in Florida**

02-12-1993

**5. FEI Number**

650387644

**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**

RICHARD A. MALONE, ESQ.

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

10959 OUNSOAS HIGHWAY

**Suite, Apt. #, Etc.**

**City**

MARATHON

**State**

FL

**Zip Code**

33050

**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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date

10/29/03

**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
DP	Scott Wilson	101 11th St. Lot 4	Marathon, FL 33050
DVP	Wayne Herr	101 11th St. Lot 42	Marathon, FL 33050
DS	Sandra Friend	101 11th St. Lot 21	Marathon, FL 33050
DT	Pamela Wilson	101 11th St. Lot 4	Marathon, FL 33050

**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:** SANDRA FRIEND *Sandra Friend*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-29-03

Daytime Phone #

305-766-9707  
305-  
289-9056

**OCEAN BREEZE PARK WEST TENANTS ASSOCIATION, INC.**

101 11<sup>TH</sup> Street Lot 8  
Marathon, Florida 33050

October 29, 2003

Florida Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

RE: Corporation Reinstatement-Ocean Breeze Park West Tenants Association, Inc.  
Document # N93000000890  
EIN # 650387644

Enclosed is our Corporation Reinstatement form and check for \$490 - \$175 fee plus \$61.25 for the 5 years annual report fee plus 8.75 for one certificate of status.

Please mail any correspondence to

OCEAN BREEZE PARK WEST TENANTS ASSOCIATION, INC.  
101 11<sup>TH</sup> STREET, LOT 8  
MARATHON, FL 33050

Thank you,  
Sandra Friend-  
Director/Secretary  
101 11<sup>th</sup> Street, Lot #21  
Marathon, FL 33050  
Day Phone 305-289-9056  
Cell Phone 305-766-9707

Pam Wilson  
Director/Treasurer  
101 11<sup>th</sup> Street, Lot 8  
Marathon, FL 33050  
Hm Phone 305-743-7515