

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # N94000000549

1. Corporation Name

CHAPMAN MONTGOMERY HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

6400 S.W. 123 TERRACE
MIAMI FL 33152

~~6400 S.W. 123 TERRACE~~
~~MIAMI FL 33152~~

5935 CHAPMAN FIELD DR.
MIAMI, FL. 33152

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

01/27/1994

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0523884

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6.

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
DP	LEA CINDY B MINDY CASSEL	6400 S.W. 123 TERRACE	MIAMI FL 33152-33156
IT	ROGERS, MAMA C ROGERS, MARIA	5935 CHAPMAN FIELD DR	MIAMI FL 33156
TV	DAVIS, TRES ALLERHAND, ANN	6405 S.W. 126TH STREET RD.	MIAMI FL 33156
		13190 SW 62 Ave	
			400002340794--9
			-11/06/97--01107--021
			****236.25 ****236.25

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LEA CINDY B MINDY CASSEL
6400 S.W. 123 TERRACE
MIAMI FL 33152

Name

MINDY CASSEL

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

5935 CHAPMAN FIELD DR.

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33152

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

Mindy Cassel
REGISTERED AGENT MUST SIGN

Date 10-30-97

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:

Mindy Cassel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-30-97 607-7788

Date

Daytime Phone #

CR2000 (8/97)