

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

09 MAR -9 PM 3:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # N96000004242**

**1. Corporation Name**

ASHLEY PARK FIVE CONDOMINIUM ASSOCIATION, INC.

**2. Principal Office Address - No P.O. Box #**

7635 Ashley Park Court

Suite, Apt. #, etc.

Suite 503

City & State

Orlando, Florida

Zip

32835

Country

**3. Mailing Office Address**

7635 Ashley Park Court

Suite, Apt. #, etc.

Suite 503

City & State

Orlando, Florida

Zip

32835

Country

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

08/14/1996

**5. FEI Number**

59-3394771

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED**

☐ \$8.75 Additional Fee required  
for a Certificate of Status

000145301820  
03/09/09--01037--001 \*\*122.50  
**REINSTATEMENT**

08-09

WOP

**7. Name and Address of Current Registered Agent**

Name

JOSEPH SEEBACH

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

7635 Ashley Park Court

Suite, Apt. #, Etc.

Suite 503

City

Orlando

State

FL

Zip Code

32835

☒ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

**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 X

JOSEPH SEEBACH

REGISTERED AGENT MUST SIGN

Date

3/2/09

**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
PD	Seebach, Joseph	7635 Ashley Court, Suite 503	Orlando, Florida 32835
VD	Coudriet, Raymond T.	7635 Ashley Court, Suite 503	Orlando, Florida 32835
D	Seebach, Tracy	7635 Ashley Court, Suite 503	Orlando, Florida 32835
S	Adams, Keisha	7635 Ashley Court, Suite 503	Orlando, Florida 32835

**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 contained in Chapter 119, 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:**

Joseph Seebach, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/2/09

Daytime Phone #