

FEB. -28' 01 (WED) 15:57 BILZIN, SUMBERG, ET. AL

TEL: 305-374-7593

P. 002

FAX AUDIT NO.: H01-21732

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

01 FEB 28 PM 12:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000004302

1. Corporation Name:

THE VILLAGE ON THE LAKES HOMEOWNERS ASSOCIATION, INC.

2. Principal Office Address: 6489 Sunset Dr. 3. Mailing Office Address: 6489 Sunset Dr.

7800 Red Road, Ste. 119

7800 Red Road, Ste. 119

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

South Miami, FL

City & State

South Miami, FL

Zip

33142

Country

USA

Zip

33143

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

8/16/1996

5. FEI Number

65-0760084

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

Gould, Gerald

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

7800 Red Road, Suite 119 6489 Sunset Drive

Suite, Apt. #, Etc.

City

South Miami

State

FL

Zip Code

33143

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

Gerald H. Gould

REGISTERED AGENT MUST SIGN

Date 2/27/01

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
VSTD	Fine, Martin	701 Brickell Ave., 30th Floor 6489 Sunset Drive	Miami, FL 33131
PD	Gould, Gerald	7800 Red Road, Ste. 119	South Miami, FL 33143
SB	Kessler, Myra	305 Thompson Avenue	Lehigh Acres, FL 33936
D	Emanuel J. Smith	6478 Sunset Drive	South Miami, FL 33131
			AD

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: *Gerald H. Gould* Gerald Gould, President

2/27/01

305-666-3075

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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From:

Account Name : BILZIN, SUMBERG DUNN PRICE & AXELROD LLP
Account Number : 075350000132
Phone : (305) 374-7580
Fax Number : (305) 350-2446

CORPORATION REINSTATEMENT**THE VILLAGE ON THE LAKES HOMEOWNERS ASSOCIATION, INC**

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