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
97 NOV 17 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000006490

1. Corporation Name

THE SORRENTO AT THE COLONY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~2402 BURNT PINE DRIVE~~	~~2402 BURNT PINE DRIVE~~
BONITA SPRINGS FL 34134	BONITA SPRINGS FL 34134

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
24301 Walden Center Drive	24301 Walden Center Drive
Suite, Apt. #, etc.: Suite 300	Suite, Apt. #, etc.: Suite 300
City & State: Bonita Springs, FL	City & State: Bonita Springs, FL
Zip: 34134 Country: USA	Zip: 34134 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 12/19/1996

5. FEI Number: 59-3416297 ☐ Applied For ☐ Not Applicable

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
~~PD~~	~~SCHMOYER, JERRY H~~	~~801 LAUREL OAK DRIVE, SUITE 500~~	~~NAPLES FL 34108~~
~~VSD~~	~~GRABNER, ROBERT H JR.~~	~~801 LAUREL OAK DRIVE, SUITE 500~~	~~NAPLES FL 34108~~
~~TD~~	~~RIVERA, CARLOS A~~	~~801 LAUREL OAK DRIVE, SUITE 500~~	~~NAPLES FL 34108~~
D/P	George R. Page	24301 Walden Center Drive	Bonita Springs, FL 34134
D/V	Randy Park	24301 Walden Center Drive	Bonita Springs, FL 34134
D/S/T	Melanie M. Himrod	24301 Walden Center Drive	Bontia Springs, FL 34134

8. Name and Address of Current Registered Agent

HASTINGS, VIVIEN N
~~801 LAUREL OAK DRIVE~~
~~SUITE 500~~
~~NAPLES FL 34108~~

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable): 24301 Walden Center Drive

Suite, Apt. #, Etc.: Suite 300

City: Bonita Springs State: FL Zip Code: 34134

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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: Vivien N. Hastings REGISTERED AGENT MUST SIGN Date: 11/3/97

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☐ No ☒ EXEMPT ~~Homeowners~~ Condominium ASSOC. (See other side for information)

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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Melanie M. Himrod, Secretary

Date: 11/3/97 Daytime Phone #: (941) 947-2600

CR2E040 (8/97)