

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

00 OCT 27 PM 3: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N97000005096

1. Corporation Name

FT. LAUDERDALE HIGHLAND SOCIETY, INC.

Principal Place of Business

Mailing Address

~~1112 SE 3RD AVE~~
~~FT LAUDERDALE FL 33010~~

~~1112 SE 3RD AVE~~
~~FT LAUDERDALE FL 33010~~

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

2. New Principal Office Address, If Applicable

1132 SE 2 AVE

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc. 1132 SE 2 AVE

Suite, Apt. #, etc.

FT. LAUDERDALE, FL

City & State FT. LAUDERDALE, FL

City & State

Zip 33316

Country USA

Zip 33316

Country USA

4. Date Incorporated or Qualified
To Do Business in Florida

09/08/1997

5. FEI Number

65-0769730

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	WILSON, CHARLES S	1112 SE 3RD AVE	FT LAUDERDALE FL 33316
D	GILL, ART	1112 SE 3RD AVE	FT LAUDERDALE FL 33316
D	HISLOP, RON	1112 SE 3RD AVE	FT LAUDERDALE FL 33316
D	KUNIANSKY, MAX	1112 SE 3RD AVE	FT LAUDERDALE FL 33316
D	MCFARLANE, WILLIAM J III.	1112 SE 3RD AVE	FT LAUDERDALE FL 33316
D	WILLIAMS, MARK	1112 SE 3RD AVE	FT LAUDERDALE FL 33316

8. Name and Address of Current Registered Agent

MCFARLANE, WILLIAM J III.

~~1112 SE 3RD AVE~~ 1132 SE 2nd AVE
~~FT LAUDERDALE FL 33310~~ FT. LAUDERDALE
FL 33316

9. Name and Address of New Registered Agent

Name

William J. McFarlane, III

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

1132 SE 2nd AVE

Suite, Apt. #, Etc.

FT. LAUDERDALE

City

State

FL

Zip Code

33316

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0305, F.S.

Signature of
Registered Agent

William J. McFarlane, III

REGISTERED AGENT

REINSTATEMENT

Date

10/25/00

11. 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

William J. McFarlane, III
William J. McFarlane, III
Director

500003468855--1

-11/17/00--01071--008

****236.25 ****236.25

10/25/00

Date

Daytime Phone #