

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

09 APR 21 AM 8:41

DOCUMENT # N98000006355

1. Corporation Name

Wicklow Greens at Tusculwilla Community
Association, Inc.

REINSTATEMENT 09-09

900150359199
04/15/09--01037--001 **183.75
CR2E081 (12/08)

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

5840 Red Bug Road

Suite, Apt. #, etc.

60

City & State

Winter Springs, FL

Zip

32708

Country

USA

3. Mailing Office Address

5840 Red Bug Rd.

Suite, Apt. #, etc.

60

City & State

Winter Springs, FL

Zip

32708

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

11/06/1998

5. FEI Number

593543884

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

Maria Palmer

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

303 Burleigh Court

Suite, Apt. #, Etc.

City

Winter Springs

State

FL

Zip Code

32708

☒ 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

Maria Palmer

Date

4/6/09

REGISTERED AGENT MUST SIGN

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
P/D	Terry Back	110 Ashford Dr.	Winter Springs, FL 32708
V/D	Maria Palmer	303 Burleigh Ct.	Winter Springs, FL 32708
S/D	Matt Weber	217 Stratford Dr.	Winter Springs, FL 32708
T/D	Shawn McFadden	405 Avondale Ct.	Winter Springs, FL 32708
D	Greg Andre	214 Stratford Dr.	Winter Springs, FL 32708
D	Mike Ferrante	301 Burleigh Ct.	Winter Springs, FL 32708

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:

Maria Palmer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/09

Date

(407)359-7705

Daytime Phone #