

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 JAN 18 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N99000004129**

1. Corporation Name

FOUNTAIN BEACH CONDOMINIUM ASSOCIATION, INC.

2. Principal Office Address

333 South Atlantic Av.

Suite, Apt. #, etc.

City & State

Daytona Beach, Florida

Zip

32118

Country

Volusia

3. Mailing Office Address

333 South Atlantic Av.

Suite, Apt. #, etc.

City & State

Daytona Beach, Florida

Zip

32118

Country

Volusia

REINSTATEMENT

01-62

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

07/02/1999

5. FEI Number

591640708

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

Becker & Poliakoff, P.A. Attn: Chris A. Draper, Esquire

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

500 Winderley Place

Suite, Apt. #, Etc.

Suite 104

City

Maitland

State

FL

Zip Code

32751

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

Chris A. Draper Esquire
REGISTERED AGENT MUST SIGN

Date **10/09/01**

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
Pres.	James C. George D	333 S Atlantic Ave	Daytona Beach, FL 32118
V.P.	Richard George D	1415 W. 22nd St. Suite 200	Oak Brook, FL 60523
D	Charlotte Campbell	333 S. Atlantic Ave	Daytona Beach, FL 32118
			LS

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:

Janell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/16/01
Date

312-953-6434
Daytime Phone #

CR2E081 (9/99)