

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORMATION

FILED
CLERK OF STATE

04 JUN 10 PM 3:26

**CORPORATION
REINSTATEMENT**



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

DOCUMENT # N99000004252

1. Corporation Name

BOCA RIDGE PROPERTY OWNERS ASSOCIATION

REINSTATEMENT 02-04

2. Principal Office Address

75 NE 6th Avenue

Suite, Apt. #, etc.

206

City & State

Delray Beach, FL

Zip

33483

Country

USA

3. Mailing Office Address

75 NE 6th Avenue

Suite, Apt. #, etc.

206

City & State

Delray Beach, FL

Zip

33483

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

09/28/1978

5. FEI Number

59-1984507

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

ERIC ESTEBANEZ

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

75 NE 6th Avenue

Suite, Apt. #, Etc.

206

City

Delray Beach

900037388479

05/27/04--01091--003 **245.00

900037388479

06/10/04--01077--001 **1.25

State

FL

Zip Code

33483

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

Date 5-21-04

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
PID	Arlene Zimberg	9334C Sable Ridge Cir.	Boca Raton, FL 33428
TID	Jim Rothgery	9350 Ketai Circle	Boca Raton, FL 33428
SID	Susan Spillert	20928 W. Boca Ridge DR.	Boca Raton, FL 33428

REINSTATEMENT 00-04

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/25/04

CR2E081 (9/01)

BOCA RIDGE PROPERTY OWNERS ASSOCIATION, INC.

POINTE MANAGEMENT GROUP, INC

75 N.E. 6TH AVE. SUITE 206
DELRAY BEACH, FLORIDA 33483
(561) 274-3031 DELRAY\BOCA
FAX (561) 274-3065

May 21, 2004

Florida Dept. of State
Division of Corporations
PO Box 6327
Tallahassee, Fl. 32314

RE: REINSTATEMENT OF BOCA RIDGE PROPERTY OWNERS ASSOCIATION, INC.

DOCUMENT # : N99000004252

To Whom it may Concern;

I called your office last week and explained the situation that the above property had not received a UBR for 2000 to 2004.

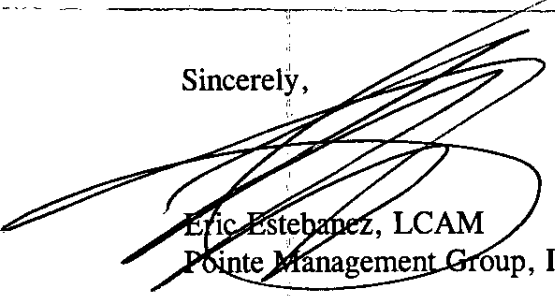
I was advised to use the form attached and ask that the late fees be waived and to mail in a check for \$245.00 to cover the reinstatement for all four years.

I ask that late fees be waived, since the Corporation listed above is a non-profit organization as well as the fact that no renewals were received for the 2000 through 2004 years at Pointe Management Group, Inc.

Please send all future renewals to the address above.

Thank you for your kind attention to this matter.

Sincerely,



Eric Estebanez, LCAM
Pointe Management Group, Inc.