

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

FILED

05 DEC 29 AM 8:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P00000013204

1. Corporation Name

WHITE OAK GROVES, INC.

2. Principal Office Address

3509 Poinsettia Avenue

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip  
33407

Country  
USA

3. Mailing Office Address

3509 Poinsettia Avenue

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip  
33407

Country  
USA

REINSTATEMENT

05

EP

CR2E081 (8/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

02/07/2000

5. FEI Number  
65-0981349

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  
Clifford I. Hertz, P.A.

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

Suite, Apt. #, Etc.  
Suite 500

City  
West Palm Beach

State  
FL

Zip Code  
33401

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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date 12/23/2005

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
DPST	Paula J. Ryan	3509 Poinsettia Avenue	West Palm Beach, FL 33407

700062469157  
12/23/05 01019 015 \*\*150.00

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

*[Signature]*

12/23/2005

Date

(561) 898-8886

Daytime Phone #

762-4358



292  
ONE NORTH CLEMATIS STREET  
SUITE 500  
WEST PALM BEACH, FLORIDA 33401  
TELEPHONE: 561.832.3300  
FACSIMILE: 561.655.1109  
www.broadandcassel.com

IVY ROSENTHAL  
DIRECT LINE: 561.366.5378  
DIRECT FACSIMILE: 561.650.1165  
EMAIL: irosenthal@broadandcassel.com

December 27, 2005

**VIA FEDEX**

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Reinstatements

Dear Sir or Madam:

This firm represents the entities listed below with regard to their reinstatements in the State of Florida. **In connection with these reinstatements, our client hereby certifies that it did not receive any notices from the State of Florida in connection with the filing of 2005 Annual Reports for these entities.**

Enclosed are the four (4) fully executed Reinstatement Forms, along with checks for the applicable filing fees as follows:


<u>Name of Entity</u>	<u>Document Number</u>	<u>Filing Fees</u>
White Oak Groves, Inc.	P00000013204	\$150.00
The Groves At Wimauma, Ltd.	A00000000241	\$526.25 (\$437.50 + \$88.75)
White Oak Brandon Creek, Inc.	P99000103476	\$150.00
Brandon Creek Apartments, Limited	A99000001980	\$526.25 (\$437.50 + \$88.75)

Please file these Reinstatements as soon as possible, and fax your confirmation letters to the undersigned at FAX # (561) 650-1165.

Thank you for your prompt attention to these matters.

Very truly yours,

BROAD AND CASSEL

  
Ivy Rosenthal  
Paralegal

Enclosures