

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 NOV 27 AM 11:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000105046

1. Corporation Name

JJR REALTY & MANAGEMENT, INC.

Principal Place of Business

Mailing Address

~~930 CLINT MOORE ROAD~~  
~~BOCA RATON FL 33487~~

~~930 CLINT MOORE ROAD~~  
~~BOCA RATON FL 33487~~

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

2. New Principal Office Address, If Applicable

6600 W. Rogers Cir

Suite, Apt. #, etc.

#6

City & State

Boca Raton, FL 33487

Zip

Country

3. New Mailing Office Address, If Applicable

6600 W. Rogers Cir.

Suite, Apt. #, etc.

#6

City & State

Boca Raton, FL 33487

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

11/09/2000

5. FEI Number

65-1069670

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
P	ROBERTS, JOANNE T	8104 TWIN LAKE DRIVE	BOCA RATON FL 33496
VP	ROBERTS, JOHN C	8104 TWIN LAKE DRIVE	BOCA RATON FL 33496

500009247095  
11/27/02--01106--011 \*\*150.00

8. Name and Address of Current Registered Agent

ROTHMAN, LEE MAX  
2295 CORPORATE BLVD., N.W.  
SUITE 134  
BOCA RATON FL 33431

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 11/1/02

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

Joanne Roberts 11/1/02 561-995-0300

Date

Daytime Phone #

CR2E040 (8/02)

J J R  
Realty & Management, Inc.

Office (561)-995-0300  
Fax (561)-995-9401

6600 W. Rogers Circle, Suite 6  
Boca Raton, FL 33487

November 01, 2002

Mr. Jim Smith  
Secretary of State  
Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

Mr. Smith:

Please find the attached and the completed 2002 Uniform Business Report (UBR)/APPLICATION FOR REINSTATEMENT and our check in the amount of \$150.00.

We have never received your original application. Please note that we have moved to a new address and it may be due to this.

If you have any questions, please call us at (561)-995-0300..

Thank you in advance for your cooperation.

Sincerely



Joanne Roberts  
President

Attachments