

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
98 OCT 28 PM 3:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P34169**  
1. Corporation Name **LIFESTYLE OF PARKLANDS, INC.**  
**LIFESTYLE PROPERTIES, INC.**

Principal Place of Business Mailing Address  
**Colorado** **5200 DTC Parkway**  
**Suite 100**  
**Englewood, CO 80111-2809**

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

2. New Principal Office Address, If Applicable <b>1690 S. Congress Avenue</b>		3. New Mailing Office Address, If Applicable <b>1690 S. Congress Avenue</b>		4. Date Incorporated or Qualified To Do Business in Florida <b>6/4/91</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number <b>84-1059408</b>	
City & State <b>Delray Beach</b>		City & State <b>Delray Beach</b>		Applied For <input type="checkbox"/> Not Applicable	
Zip <b>33445</b>	Country <b>USA</b>	Zip <b>33445</b>	Country <b>USA</b>	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P,D	Daniel H. Levy	c/o Oriole Homes, Attn: Daniel H. Levy, 1690 South Congress Avenue	Delray Beach, FL 33445

**REINSTATEMENT**

600002678816--0  
-11/03/98--01030--016  
\*\*\*1350.00 \*\*\*1350.00  
94-98  
SL 10-29-98

8. Name and Address of Current Registered Agent <b>Richard Levy</b> <b>c/o Hapco</b> <b>11900 Biscayne Boulevard, Suite 806</b> <b>Miami, Florida 33181</b>		9. Name and Address of New Registered Agent Name <b>Daniel H. Levy</b> Street Address (P.O. Box Number is Not Acceptable) <b>1690 South Congress Avenue</b> Suite, Apt. #, Etc. <b>Suite 200</b> City <b>Delray Beach</b> State <b>FL</b> Zip Code <b>33445</b>	
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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.  
Signature of Registered Agent **Richard Levy** Date **10-22-98**  
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. 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: **Daniel Levy, President** Date **10-22-98** Daytime Phone # **561 274-2000**  
X344

CR2E040 (1/88)