

FEB-25-2002 16:12

NASON, YEAGER

FILED

02 FEB 25 PM 4:44

H02000044076 6

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS			
<b>CORPORATION REINSTATEMENT</b>		<b>DOCUMENT # P94000079295</b>	
1. Corporation Name <b>BROWN REAL ESTATE MANAGEMENT, INC.</b>			
2. Principal Office Address <b>18781 Misty Lake Drive</b>		3. Mailing Office Address <b>18781 Misty Lake Drive</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>Jupiter, Florida</b>		City & State <b>Jupiter, Florida</b>	
Zip <b>33458</b>	County <b>Palm Beach</b>	Zip <b>33458</b>	County <b>Palm Beach</b>
4. Date Incorporated or Qualified To Do Business in Florida <b>10/27/94</b>		5. FEI Number <b>65-0531057</b>	
		Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		50.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent			
Name <b>Lioce, Domenick R.</b>			
Street Address (P.O. Box Number is Not Acceptable) <b>1645 Palm Beach Lakes Blvd., Suite 1200</b>			
Suite, Apt. #, Etc.			
City <b>West Palm Beach</b>		State <b>FL</b>	Zip Code <b>33401</b>
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0593, F.S.			
Signature of Registered Agent <b>Domenick R. Lioce</b>		Date <b>February 25, 2002</b>	
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
<b>D</b>	<b>Brown, Robert D.</b>	<b>18781 Misty Lake Drive</b>	<b>Jupiter, FL 33458</b>
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 satisfied 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)(c), 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: <b>Robert D. Brown</b>		02/25/02 561-684-6841	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

## Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

### Electronic Filing Cover Sheet

**Note:** Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000044076 6)))

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

**To:**

Division of Corporations  
Fax Number : (850)205-0384

**From:**

Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.  
Account Number : 073222003555  
Phone : (561) 686-3307  
Fax Number : (561) 686-5442

## CORPORATION REINSTATEMENT

**BROWN REAL ESTATE MANAGEMENT, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$1,200.00