

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 APR 10 PM 12:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000082959

1. Corporation Name

EAGLE CREEK TOWNHOMES ASSOCIATION, INC.

Principal Place of Business

11700 ROYAL PALM BLVD  
CORAL SPRINGS FL 33065

Mailing Address

PO BOX 9198  
CORAL SPRINGS FL 33075-9198

SAME



REINSTATEMENT

97-98

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

2. New Principal Office Address, if Applicable

11856 ROYAL PALM BLVD

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida

11/14/1994

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0539212

Applied For

City & State

CORAL SPRINGS, FL

City & State

City & State

Zip

33065

Country

USA

Zip

Country

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
<del>CHA</del>	<del>CARLETON, JON</del>	<del>11700 ROYAL PALM BLVD</del>	<del>CORAL SPRINGS FL 33071</del>
PRES	CHARLES VICCHINI	11856 ROYAL PALM BLVD	CORAL SPRINGS, FL 33065
V. PRES	ELEANORA FROZZITTA	11856 ROYAL PALM BLVD	CORAL SPRINGS, FL 33065
TREAS	ALLYNE MORGENSTERN	11856 ROYAL PALM BLVD	CORAL SPRINGS, FL 33065
Secy	HILDA MATOS	11856 ROYAL PALM BLVD	CORAL SPRINGS, FL 33065
D	GREGG LEWEN	11856 ROYAL PALM BLVD	CORAL SPRINGS, FL 33065

8. Name and Address of Current Registered Agent

~~CARLETON, JON~~ ARLYNE MORGENSTERN, TREAS  
11856 ROYAL PALM BLVD  
CORAL SPRINGS FL 33071  
11856 ROYAL PALM BLVD  
CORAL SPRINGS, FL 33065

9. Name and Address of New Registered Agent

NAME  
ARLYNE MORGENSTERN, TREAS  
Street Address (P.O. Box Number is Not Acceptable)  
11856 ROYAL PALM BLVD  
Suite, Apt. #, Etc.  
500002491535--2  
-04/12/98-01006-012  
City  
CORAL SPRINGS  
State  
FL  
Zip Code  
33065  
\*\*\*908-75

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

Arlyne Morgenstern

REGISTERED AGENT MUST SIGN

Date 3/15/98

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:

Arlyne Morgenstern

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/98

954-796-2126

Date Daytime Phone #

CR2040 (8/97)