

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 9910f2  
97 JAN 16 AM 11:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P94000089831

1. Corporation Name

HIGHPOINT INVESTMENT GROUP KEY WEST, INC.

Principal Place of Business

Mailing Address

3011 MILLSTREAM ROAD  
MARENGO, ILLINOIS 60152

**REINSTATEMENT** 91-97

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable

3. New Mailing Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

12-12-94

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0540101

Applied For

Not Applicable

City & State

City & State

Zip

Country

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)

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
PRES.	DAVID LINN	3011 MILLSTREAM ROAD	MARENGO, ILLINOIS 60152
A.S.	KAREN ROZAR	1201 HAYS STREET	TALLAHASSEE, FLORIDA 32301

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FLORIDA 32301

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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.

KAREN B. ROZAR as its agent

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date 01-16-97

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐

(See other side for information  
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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

KAREN B. ROZAR A.S.

01-16-97

Date

Daytime Phone #

CR2ED40 (12/95)



ACCOUNT NO. : 072100000032

REFERENCE : 223808 8728A

AUTHORIZATION :

*Patricia Pizante*

COST LIMIT : \$ 915.00

ORDER DATE : January 15, 1997

ORDER TIME : 9:39 AM

ORDER NO. : 223808-005

CUSTOMER NO: 8728A

100002060321--2

CUSTOMER: Ms. Donna J. Mccord  
Feldman & Koenig  
1315 Whitehead Street

Key West, FL 33040

DOMESTIC FILINGSNAME: HIGHPOINT INVESTMENT GROUP  
KEY WEST, INC.

RECEIVED  
JAN 15 1997  
OFFICE OF CORPORATION  
STATE OF FLORIDA  
File First

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susana Romagosa  
EXAMINER'S INITIALS

*JB*  
*1-16-97*