

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # P96000090316

1. Corporation Name

REINECKE FUCHS OPERATING, INC.

00 NOV 13 PM 4:35

Principal Place of Business

Mailing Address

COURTHOUSE TOWER, SUITE 2450
WEST FLAGLER ST.
MIAMI FL 33130-6808

COURTHOUSE TOWER, SUITE 2450
WEST FLAGLER ST.
MIAMI FL 33130-6808



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-11/30/00--01101--014

****150.00 ****150.00

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

2. New Principal Office Address, If Applicable

National Audubon Society

Suite, Apt. #, etc.

700 Broadway

City & State

New York, NY

Zip

10003

Country

USA

3. New Mailing Office Address, If Applicable

National Audubon Society

Suite, Apt. #, etc.

700 Broadway

City & State

New York, NY

Zip

10003

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

11/04/1996

5. FEI Number

65-0706539

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
PS <i>P/D</i>	PATTERSON, JOHN H. <i>John H. Flicker</i>	44 WEST FLAGLER ST., SUITE 2450 <i>700 Broadway</i>	MIAMI FL <i>New York, NY 10003</i>
DPT <i>T/D</i>	SHEHAN, JEAN D. <i>James A. Cunningham</i>	7800 RED RD #224 <i>700 Broadway</i>	SOUTH MIAMI FL <i>New York, NY 10003</i>
DVP <i>S/D</i>	SHEHAN, W. MASON <i>Patricia Douglas</i>	7800 RED RD #224 <i>700 Broadway</i>	SOUTH MIAMI FL <i>New York, NY 10003</i>
D	STONE, BRUCE M	701 BRICKELL AVE #3000	MIAMI FL
D	MCCONNELL, JAMES H.T. JR	22101 CONSTITUTION HWY	RAPIDAN VA
D	RINEHART, SUSAN	13 WOOD LN	CHARLOTTESVILLE VA

8. Name and Address of Current Registered Agent

PATTERSON, JOHN H
COURTHOUSE TOWER, SUITE 2450
WEST FLAGLER ST.
MIAMI FL 33130-6808

9. Name and Address of New Registered Agent

Name *JOHN H. Patterson, P.A.*
Street Address (P.O. Box Number is Not Acceptable)
44 West Flagler Street
Suite, Apt. #, Etc.
Suite 2000
City *MIAMI* State *FL* Zip Code *33130-6818*

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

John H. Patterson, P.A.
REGISTERED AGENT MUST SIGN

Date *November 3, 2000*

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:

Patricia Douglas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/25/2000 *622-919-3172*
Date Daytime Phone #

CR20040 (8/00)