

APPLICATION  
FOR  
REINSTATEMENTFLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

FILED

02 JUL 31 PM 4:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P98000024757

1. Corporation Name

Share Properties, Inc.

Mailing Address

Principal Place of Business

4770 Hairland Drive  
West Palm Beach, FL  
334154770 Hairland Drive  
West Palm Beach, FL  
33415

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

2. New Mailing Address, If Applicable

3. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

REINSTATEMENT 99-02

DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified  
To Do Business in Florida

March 16, 1998

5. FEI Number

65-0821029

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)

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.	Ralph L. Eccles	4770 Hairland Drive	West Palm Beach, FL 33415
V.P.	Sherine W. Eccles	4770 Hairland Drive	West Palm Beach, FL 33415
			900007077209--1 -08/13/02--01054--001 ***1058.75 ***1058.75
			900007077209--1 -08/13/02--01054--002 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

Ralph L. Eccles  
1025 Fairfax Circle  
Lantana, FL 33462

9. Name and Address of New Registered Agent

Name

Dorothy A. Hoyt

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

5301 N Federal Highway

Suite, Apt. #, Etc.

Suite 345

City

Boca Raton

State

FL

Zip Code

33487

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

REGISTERED AGENT MUST SIGN

Date 7/29/02

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)12. 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.)

13. 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

Ralph Eccles  
Dorothy Hoyt

7/29/02

561-998-7555