

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

P910F2

APPLICATION

FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 DEC 16 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT. # P99000063476

1. Corporation Name

FITZPATRICK REALTY & ASSOCIATES, INC.

Principal Place of Business

5231 W. BROWARD BLVD
PLANTATION FL 33317

Mailing Address

~~855 PINE RIDGE DRIVE~~
~~PLANTATION FL 33317~~

5231 W. Broward Blvd
Plantation, FL
33317



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

5231 W. Broward Blvd

Suite, Apt. #, etc.

Plantation, FL

Zip

33317

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/12/1999

5. FEI Number

65-0933793

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
PTS	FITZPATRICK, LYNNE	855 PINE RIDGE DR 5231 W. Broward Blvd	PLANTATION FL 33317

800008818498
11/06/02--01029--005 **158.75

12/16

8. Name and Address of Current Registered Agent

FITZPATRICK, LYNNE
855 PINE RIDGE DRIVE
PLANTATION FL 33317

9. Name and Address of New Registered Agent

Name

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

5231 W. Broward Blvd

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33317

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. or 617.0505, F.S.

Signature of
Registered Agent

Lynne Fitzpatrick

REGISTERED AGENT MUST SIGN

Date

10/25/02

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lynne Fitzpatrick

Date

Daytime Phone #

954 321-6760

CR2040 (8/02)



Fitzpatrick Realty & Associates, Inc.

5231 W. Broward Blvd Plantation, Florida 33317

(954)321-6760
Fax (954) 321-6119

Florida Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

10/25/02

Dear Sir or Madam:

I notified the department that I never received the annual report back in March 2002. I was told that when I received the second notice, I could send a note and pay the \$150.00. I also had the person that I spoke with change the address to send the new notice. I was also advised that I could download the form and print it. I tried to but the explorer on the computer system would not deliver it properly and showed up as scrambled. I elected to wait for the second notice, which I never got.

Upon receipt of the dissolution notice, I called the department which advised to write a letter explaining the circumstances and send along the check for \$150.00. I hope that you will accept this, as I did not get any previous notices.

Thank you,

Lynne Fitzpatrick
Registered Agent