

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUN 10 PM 2:31

DOCUMENT # N03777

1. Corporation Name

KIWANIS CLUB OF DAVIE INC

600037847786
06/10/04--01064--002 **245.00

2. Principal Office Address

9470 TANGERINE PL

Suite, Apt. #, etc.

Suite 403

3. Mailing Office Address

P.O. Box 291377

Suite, Apt. #, etc.

City & State

FT LAUDERDALE FL

City & State

DAVIE FL

Zip 33324

Country

USA

Zip 33329-1377

Country

USA

REINSTATEMENT 01-04

4. Date Incorporated or Qualified
To Do Business in Florida

16 JUN 1984

5. FEI Number

59-6168816

Applied For

Not Applicable

CERTIFICATE OF STATUS DESIRED ☐

\$6.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

FRANK L SCHNEIDER

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

9470 TANGERINE PL

Suite, Apt. #, Etc.

Suite 403

City

FT LAUDERDALE

State
FL

Zip Code

33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

F L Schneider

REGISTERED AGENT MUST SIGN

Date

17 JUN 04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Robert Oldham	3100 SW 133 Ter	DAVIE FL 33330
V/D	DALE RUPERT	3563 W Tree Tops Ct	DAVIE FL 33328
D	MIKE DONATE	1930 NW 91 Ter	Pembroke Pines 33324
T/D	FRANK L SCHNEIDER	9470 TANGERINE PL Suite 403	FT LAUDERDALE FL 33324
D	William Spader	7931 SW 45 St	FT LAUDERDALE FL 33328
D	DAVID DONZELLA	2945 Begonia Way	Cooper City FL 33026

10. 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:

F L Schneider

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

17 JUN 04 954-475-9988

FRANK L SCHNEIDER
T/D

CR2001 (01/04)

8 June 2004

Davie Kiwanis Club, Inc.
P.O. Box 291377
Davie, FL 33329-1377
954-475-9988 Fax 954-452-7575

FEI: 59-6168816
Reinstatement

Department of State
Division of Corporations
409 East Gaines St.
Tallahassee, FL 32399

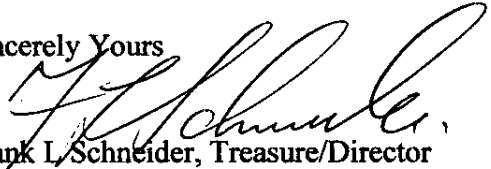
To Whom It May Concern:

We hereby request that all penalties be waived.

As a Non-Profit Service Corporation with only unpaid volunteers we have had our problems with members, as in this case of not paying the annual non-profit corporation fee. The bill had been sent to 3210 Rosewood Ct, Davie, Florida, 33328 instead of our P.O. Box for the last 4 years while this person has been under a doctor's care for these many years. The club members who took over her positions were not aware that this obligation was miss directed.

The enclosed check is for the years of 2001, 2002, 2003, 2004.

Sincerely Yours



Frank L. Schneider, Treasure/Director
954-475-9988