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

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REINSTATEMENT 01-04

1. Corporation Name: KIWANIS Club of DAVIE Inc

2. Principal Office Address	3. Mailing Office Address
9470 TANGERINE PL	P.O. Box 291377
Suite, Apt. #, etc.: Suit 403	Suite, Apt. #, etc.:
City & State: FtLauderdale FL	City & State: DAVIE FL
Zip: 33324 Country: USA	Zip: 33329-1377 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 16 JUN 1984

5. FEI Number: 59-6168816 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $5.75 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: 7 JUN 04

CR2E081 (01/04)

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 Treetops Ct	Davie FL 33328
D	Mike Donate	1930 NW 9 Ter	Pembroke Pines 33324
T/D	FRANK L Schneider	9470 Tangerine Place #403	Ft Lauderdale FL 33324
D	William Snyder	7931 SW 95 St	Ft Lauderdale FL 33328
D	David Donzella	2945 Begania 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 — 7 JUN 04 — 954-475-9988

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FRANK L SCHNEIDER
T/D

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