

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

09 AUG 28 AM 8:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N21759

1. Corporation Name

Southwest Florida Chef's Association, Inc.

W09 — 37674

300159738183
08/19/09--01037--022 **183.75

REINSTATEMENT 07-09

2. Principal Office Address - No P.O. Box #
1932 Piccadilly Circle

3. Mailing Office Address
1932 Piccadilly Circle

Suite, Apt. #, etc.
Trafalgar Woods

Suite, Apt. #, etc.
Trafalgar Woods

City & State
Cape Coral, Florida

City & State
Cape Coral, Florida

Zip Country
33991 USA

Zip Country
33991 USA

4. Date Incorporated or Qualified To Do Business in Florida 1985

5. FEI Number Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Rainer M Drygala

Street Address (P.O. Box Number is Not Acceptable)
1932 Piccadilly Circle

Suite, Apt. #, Etc.
Trafalgar Woods

City
Cape Coral

State Zip Code
FL 33991

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Rainer M Drygala
REGISTERED AGENT MUST SIGN

Date 8/15/09

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
TD	Rainer M Drygala	1932 Piccadilly Circle	Cape Coral, Florida 33991
PD	Christopher M Cassel	39 Wickliffe Drive	Naples, Florida 34110
VD	Craig Panneton	21620 Helmsdale Run	Estero, Florida 33928
SD	Rosemarie A Drygala	1932 Piccadilly Circle	Cape Coral, Florida 33991

REINSTATEMENT RH

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 contained in Chapter 119, 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:

Rainer M Drygala
RAINER M DRYGALA TD

8/15/09

239-283-1795

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #