

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1997 NOV 17 PM 4:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N31105**

1. Corporation Name

C-GULLS OF FORT MYERS, INC.

Principal Place of Business

5060 Key Largo Dr
~~26851 WEDGEWOOD DR~~
~~401 Punta Gorda FL 33950~~
~~BONITA SPRINGS FL 33923~~
~~US~~

Mailing Address

5060 Key Largo Drive
~~26851 WEDGEWOOD DR~~
~~401 Punta Gorda FL 33950~~
~~BONITA SPRINGS FL 33923~~
~~US~~



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

2. New Principal Office Address, If Applicable

5060 Key Largo Dr
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

5060 Key Largo Drive
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

03/09/1989

5. FEI Number

NOT APPLICABLE

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
DP	DAVIS, JAMES	14660 DOUBLE EAGLE CT	FT MYERS FL 33912
DGT DT	SMITH, WINFIELD Galburt, Jean	26851 WEDGEWOOD DR, APT 101 5060 Key Largo Drive	BONITA SPRINGS FL Punta Gorda FL 33950
DV	WELLS, BOB Field, Linda	2040 ARUBA AVE SE 2700 Colonade Lane	FT. MYERS FL North Port, FL 34286

REINSTATEMENT

9760
11/17/97

8. Name and Address of Current Registered Agent

~~SMITH, WINFIELD~~
~~26851 WEDGEWOOD DR, APT 101~~
~~BONITA SPRINGS 33923~~

9. Name and Address of New Registered Agent

Name
Jean Galburt
Street Address (P.O. Box Number is Not Acceptable)
5060 Key Largo Drive
Suite, Apt. #, Etc.
900002353199-0
City
Punta Gorda
State
FL
Zip
33950

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 **Jean Galburt**

THE REGISTERED AGENT MUST SIGN

Date **11-12-97**

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information
on Intangible tax.)

12. 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: **Jean Galburt**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-12-97 941-639-7040

Date Daytime Phone #