

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Kathleen Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
20 JUN -2 AM 9:08
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N37792
1. Corporation Name **Coral City Elks Lodge #610 NO. 610 and Temple 400 Coral City Temple NO. 400, I.B. POE OF THE World, INC. Ref. N37792**

Principal Place of Business
**1107 Whitehead St
Key West, FL 33040**

REINSTATEMENT 91-990

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

2. New Principal Office Address, If Applicable 1107 Whitehead St		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 237173929	
City & State Key West, FL		City & State		Applied For ☒ Not Applicable	
Zip 33040	Country Monroe	Zip	Country	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)			
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City, State, Zip
exalted ruler	Hugh Robertson	800 Emma St Apt 214	Key West, FL 33040
daughter ruler	Delores Robertson	E23 11TH Ave	Key West, FL 33040
financial secretary	Ken Sullivan	1020 Emma St Apt 4C	Key West, FL 33040
recording secretary	James Manite	711 Chapman Ln	Key West, FL 33040
house chairman	Samuel Kelly	208 Truman Ave	Key West, FL 33040

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
Hugh Robertson 800 Emma St # 214 Key West, FL 33040 ESQUINADO, STEVE B. 608 Whitehead St	Name Hugh Robertson Street Address (P.O. Box Number is Not Acceptable) 800 EMMA ST # 214 Suite, Apt. #, Etc. # 214 City Key West State FL Zip Code 33040

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 **Shyl G. Robertson** Date **5-25-99**

REGISTERED AGENT MUST SIGN

11. This corporation owes 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: **Shyl G. Robertson** Date **5-25-99**

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

CR2E081 (12/98)