

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000001446

1. Corporation Name

CLEAR COAT MARINE, INC.

Principal Place of Business

Mailing Address

1848 SHORE ACRES BLVD NE
ST PETERSBURG FL 33703

1848 SHORE ACRES BLVD NE
ST PETERSBURG FL 33703

01 OCT 26 PM 5:44



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

12/29/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

APPLIED FOR

Not Applicable

Zip

Country

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	VONDRACEK, JONATHAN D	5527 BAYOU GRANDE BLVD NE	ST PETERSBURG FL 33703

400004673554--4

-11/14/01--01094--009

***150.00 ***150.00

SP

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

VONDRACEK, JONATHAN D
5527 BAYOU GRANDE BLVD NE
ST PETERSBURG FL 33703

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

Date 10-23-01

REGISTERED AGENT MUST SIGN

11. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-23-01

Date

727 526 4719

Daytime Phone #

CR2040 (8/01)

292

10-23-01

To whom it may concern:

The reason as you can see circled why this payment is late is that it was mailed to the wrong address for the second year in a row. Would you be so kind as to change the mailing address to read the following: 5527 Bayou Grande Blvd. St.Petersburg, FL 33703 and if you have any further questions please call me at 727-526-4719 thank you.

Jon Vondracek