

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # N92000000196

1. Corporation Name

UPPER KEYS ROTARY FOUNDATION, INC.

Principal Place of Business

91605 OVERSEAS HWY
TAVERNIER FL 33070

Mailing Address

PO BOX 1514
TAVERNIER FL 33070

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11-02-92

5. FEI Number

65-0385528

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)

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
PD	DONNA BOSOLD	604 LA PALOMA ROAD	KEY LARGO FL 33037
VD	PETER D BACHELER	89240 OVERSEAS HWY - 12	TAVERNIER FL 33070
VD	JOHN LA ROCCO	424 SUNSHINE BOULEVARD	TAVERNIER FL 33070
TD	DANIEL KRATISH	238 PUEBLO STREET	TAVERNIER FL 33070
SD	FRANK HAWKINS	204 OCEAN DRIVE	TAVERNIER FL 33070
D	NICHOLAS W MULICK	81990 OVERSEAS HWY - 201	ISLAMORADA FL 33036

8. Name and Address of Current Registered Agent

CHARLES A RUSSELL
C/O FLORIDA KEYS ELECTRIC COOP
91605 OVERSEAS HIGHWAY
TAVERNIER FL 33070

9. Name and Address of New Registered Agent

Name

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

City

State
FL

Zip Code

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

CHARLES A RUSSELL - REGISTERED AGENT MUST SIGN

Date 10-19-99

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
NICHOLAS W MULICK

10-19-99
Date

305-664-3336
Daytime Phone #

FILED

99 OCT 28 PM 2:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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