PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION **FOR** REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

149004

1. Corporation Name

MARINA AT FORT PIERCE, INCORPORATED

Principal Place of Business

Mailing Address

219 FISHERMANS WHARF FT. PIERCE FL 34950

219 FISHERMANS WHARF

FT. PIERCE FL 34950



FILED

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JECKLIARY OF STATE TALLAHASSEE, FLORIDA



If above	addresses are	incorrect in any way, line thr	ough incorrect is	nformation a	and enter o	orrection below.				
2. New Pr	Address, If Applicable	ing Office Address, If Applicable Supplies Blud.			Date Incorporated or Qualified To Do Business in Florida 10/28/1946					
City & State Ft. PIERCE, Fl. City & State Ft. F				PIERCE Fl.			5. FEI Number 59-0586549			Applied For Not Applicable
Zip 34	Country U.S.	782 Country .S.			6. CERTIFICATE OF STATUS DESIRED for a Certificate of Status					
7. Names	and Street Ad	dresses of Each Officer and/	or Director (Flo	rida nonpro	fit corpora	tions must list at le	ast 3 directors)			
Title(s)	2	Name of Officers and/or Directors 3				et Address of Eac cer and/or Directo	City / State / Zip			
PD	ZELLER, WILLIAM JR.			219 FISHERMANS WHARF			FT PIERCE FL			
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							, 90	 	559	
							10/20/	10301008008 	**15	0.00
	:									
	8. Nam	e and Address of Current I	Registered Age	nt	Name and Address of New Registered Agent					
ZELLER, WILLIAM JR.						Name William Zeller Jr. Street Address (P.O. Box Number is Not Acceptable)				
219 FISHERMANS WHARF FT. PIERCE FL 34946						29/ C Suite, Apt. #, Etc		ise Blud.		
11116						City Foo-	+ Piac	Sta F	te Zip C	ode 4982
10. I, being	appointed the	e registered agent of the abo	ve named corpo	ration, am fa	amiliar witi	n and accept the o		•		7700
Signature o Registered		William	GISTERED AG	Lin_	SIGN			Date/ O/11	/03	
this rein	statement app	officer or director or the receivable of the reason for dissoon have been paid and the n	lution has been	eliminated, t	the corpor	ate name satisfies	the requirements	of section 607.0401 or 617.	0401, F.S.	that all fees

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.





October 11, 2003

Division Of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, FL. 32314-6327

Please find enclosed a check for \$150.00 for our annual corporation report. We apologize that this item was overlooked, it was certainly unintentional. The corporation is still in operation but the property was sold and the business has been changed to a mobile business. We did place a forward with the post office but some items are not being forwarded to the new billing address. We also had a bookkeeper change and the new bookkeeper was not aware that this has not been paid. We asked that you please waive the reinstatement charges as we are a small business and the penalty would severely hurt my business. We have always paid this on a timely manner and plan to do the same in the future. Your understanding in this matter will be appreciated.

-Sincerely, -

William Zeller, President Marina at Fort Pierce, Inc.