

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

05 APR -1 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 263086

1. Corporation Name

John's Tackle Shop, Inc.

WOSODDD 12267

2. Principal Office Address

301 East Blue Heron Blvd.

Suite, Apt. #, etc.

3. Mailing Office Address

301 East Blue Heron Blvd.

Suite, Apt. #, etc.

REINSTATEMENT

03-05

City & State

Riviera Beach, FL

Zip  
33404

Country  
USA

City & State

Riviera Beach, FL

Zip  
33404

Country  
USA

4. Date Incorporated or Qualified  
To Do Business in Florida

9/27/1962

5. FEI Number

591023688

Applied For  
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Frank W. Hammett

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

1215 Yacht Harbor Dr.

Suite, Apt. #, Etc.

City

Riviera Beach

State

FL

Zip Code

33404

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

Frank Hammett

Date

2-28-95

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PTD	Frank W. Hammett	1215 Yacht harbor Dr.	Riviera Beach, FL 33404
VSD	Kevin Hammett	301 East Blue Heron Blvd	Riviera Beach, FL 33404

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04/13/05--01005--010 \*\*1050.00

10. 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:

Frank Hammett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-28-95

Daytime Phone #

CR2E081 (01/05)