

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 JAN 10 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-01/15/97--01081--002
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DOCUMENT # 462443

1. Corporation Name

HOWARD FORE OF FLORIDA
2400 S. OCEAN DRIVE
APT 736 VILLA 2

FORT PIERCE FL 33450

Principal Place of Business

Mailing Address

FT. PIERCE, FL. FT. PIERCE FL.

REINSTATEMENT AS-96

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable

3. New Mailing Address, If Applicable

HOWARD FORE OF FLORIDA

4. Date Incorporated or Qualified
To Do Business in Florida

10-1-74

Suite, Apt. #, etc.

Suite, Apt. #, etc.

PO Box 93

5. FEI Number

38-0937190

Applied For

City & State

City & State

GROSSE ILE, MI.

6.

CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

Zip

Country

Zip

Country

48138

USA

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
PRES & TREASURER	RICHARD BOHL	29725 BAYVIEW GROSSE ILE MI 48138	GROSSE ILE MI 48138
V. PRES	CATHY MCGUIRE	3351 THIRD STREET TRENTON, MI 48183	TRENTON, MI 48183
SECT	AMANDA BOHL	210501 WEST RIVER GROSSE ILE MI 48138	GROSSE ILE MI 48138
DIR	BRUCE MCGUIRE	3351 THIRD STREET TRENTON MI, 48183	TRENTON MI, 48183
DIR	CERISE BOHL	29725 BAYVIEW GROSSE ILE, MI 48138	GROSSE ILE, MI 48138

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HARRY BOHL PRESIDENT & TREASURER
7520 MACOMBS STREET 7A
GROSSE ILE, MI 48138

RICHARD BOHL
2400 S. OCEAN DRIVE
APT 736 VILLA II
FORT PIERCE FL. 33450

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

Richard Bohl

REGISTERED AGENT MUST SIGN

Date 12/31/95

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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

Richard Bohl

12/31/96 313 285 8110

Date

Daytime Phone #

CR2E040 (12/95)