

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS APPLICATION

APPLICATION FOR REINSTATEMENT



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

APPROVED
AND
FILED

97 NOV 17 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 549684

1. Corporation Name

SEA AIRE BY THE SEA, INC.

Principal Place of Business

1715 SOUTH OCEAN BLVD
DELRAY BEACH FL 33483

Mailing Address

1715 SOUTH OCEAN BLVD
DELRAY BEACH FL 33483

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
30 Marine Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Delray Beach, FL

Zip

Country

Zip
33482

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

10/20/1977

5. FEI Number

59-1791798

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 Titles	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	JONAP, MARY MORTON	1715 SOUTH OCEAN BLVD	DELRAY BEACH FL 33444

8. Name and Address of Current Registered Agent

JONAP, MARY M.
1715 S OCEAN BLVD.
DEL RAY BCH. FL 33444

9. Name and Address of New Registered Agent

Name
Jonap, Mary M.
Street Address (P.O. Box Number is Not Acceptable)
30 Marine Way
Suite, Apt. #, Etc.
City
Delray Beach
State / Zip Code
FL / 33482

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 *X Mary M. Jonap*
REGISTERED AGENT MUST SIGN

Date

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

no assets

(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)(f), 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.

X Mary M. Jonap

President