

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **702868**

1. Corporation Name

New Ft. Myers Gun Club.

2. Principal Office Address

943 S.E. 11th Ave

Suite, Apt. #, etc.

City & State

Cape Coral Fl.

Zip

33990

Country

U.S.

3. Mailing Office Address

2622 N.W. 4th St.

Suite, Apt. #, etc.

City & State

Cape Coral Fl.

Zip

33993

Country

U.S.

FILED

04 APR 28 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000032094180

04/07/04--01034--011 **122.50

REINSTATEMENT 03-24

4. Date Incorporated or Qualified
To Do Business in Florida

09/08/1961

5. FEI Number

59-1843594

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

Tamutis, Michael W.

000032094180

04/28/04--01058--013 **175.00

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

2967 Ribbon Ct.

Suite, Apt. #, Etc.

City

Ft. Myers

State

FL

Zip Code

33905

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

Michael W. Tamutis

Date **3/17/04**

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
P	Gallo, Morris	12734 Kenwood Ln. S.W.	Ft. Myers, Fl. 33907
D	Tamutis, Michael W.	2967 Ribbon Ct.	Ft. Myers, Fl. 33905
T	Dunn, Lee	2622 N.W. 4th St.	Cape Coral, Fl. 33993
S	Krous, James	303 Beldaire Rd.	Ft. Myers, Fl.
D	Beel Ford, Robert	621 S.W. 3rd Ct. #102A	Cape Coral, Fl. 33991

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:

Lee Dunn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

239-574-4444

Daytime Phone #