PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 708764

FILED
99 OCT 25 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[redacted]

07/12/99 900140319 961.25

1. Corporation Name

THE LEE COUNTY MISSION BOARD, INC.

Principal Place of Business	Mailing Address
10320 GLADIOLUS DRIVE P.O. BOX 06072 FT. MYERS FL 33908-8072 US	P.O. BOX 06072 FT. MYERS FL 33908-8072 US

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
Suite, Apt #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business In Florida: 04/08/1965

5. FEI Number: 23-7378076 ☐ 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	~~COOPER, PAUL A~~ TER MEER, MARY	~~7047 E BRANDYWINE CIR~~ 4220 STEAMBOAT BEND	FT. MYERS FL 33919
~~VP~~ D	HOLMAN, EINER	7193 VASSAR DR., S.W.	FT. MYERS FL 33908
D	BOLER, SANDRA	2050 PERIWINKLE WAY	SANIBEL ISLAND FL 33957
T	LOVGREN, JEAN	3430 SE 2ND PLACE	CAPE CORAL FL
S	~~CHAMBERLIN, MILLIE~~ DON DAVIS	~~36 BARKLEY CIRCLE, STE. 317~~ 3402 SUNDIAL CT.	FT. MYERS FL 33908
~~P~~ VP	PARK, ALVIN	6807 TURBAN CT	FT MYERS FL 33908 SP

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
COOPER, PAUL A 7047 E. BRANDYWINE CIR. FT MYERS FL 33919	Name: TER MEER, MARY Street Address (P.O. Box Number is Not Acceptable): 4220 STEAMBOAT BEND Suite, Apt. #, Etc.: City: FT. MYERS State: FL Zip Code: 33919

CR2E040 (8/99)

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: Mary Ter Meer — REGISTERED AGENT MUST SIGN — Date: 10/20/99

11. 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: Mary Ter Meer — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 10/20/99 — Daytime Phone #: (941) 489-3745

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