

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **715039**

1. Corporation Name

KENNEDY COLUMBIAN CLUB, INC.

FILED

97 NOV 21 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

4410 N. BANANA RIVER DR.
P.O. BOX 321571
COCOA BEACH FL 32931
US

Mailing Address

4410 N. BANANA RIVER DR.
P.O. BOX 321571
COCOA BEACH FL 32932-1571
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

4. Date Incorporated or Qualified
To Do Business in Florida

07/31/1968

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

23-7372952

Applied For

City & State

City & State

Not Applicable

Zip

Country

Zip

Country

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	GRANZULIS, ARTHUR	519 SEAPORT BLVD	CAPE CANAVAL FL
D	LANDMAN, RAYMOND	1735 RICHARDSON RD.	CAPE CANAVAL FL 32916-5737 -11/25/97--01054--013 ****236.25 ****236.25
D	RYAN, RICHARD	4015 GATEWOOD ST.	COCOA FL 32926
TD	MARKOSKY, FRANCIS H.	1525 MINUTEMAN CSWY #103	COCOA BEACH FL 32931
PD	WATSON, REDMOND	4800 OCEAN BEACH BLVD	COCOA BEACH FL
D	MADDEN, JOHN	1595 N ATLANTIC AE 109	COCOA BEACH FL

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MARKOSKY, FRANSIS H
1525 MINUTEMAN CSWY #103
COCOA BEACH FL 32931

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

Francis H. Markosky
REGISTERED AGENT MUST SIGN

Date 11/19/97

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

Yes ☐ No ☒

(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)(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:

Francis H. Markosky
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/19/97

Date

407-783-0297

Daytime Phone #

CR2040 (8/97)