

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

01 MAY 15 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 743000

1. Corporation Name

Sanibel Beach Club II Association, Inc.

2. Principal Office Address

205 Periwinkle Way

Suite, Apt. #, etc.

City & State

Sanibel, Florida

Zip

33957

Country

USA

3. Mailing Office Address

205 Periwinkle Way

Suite, Apt. #, etc.

City & State

Sanibel, Florida

Zip

33957

Country

USA

REINSTATEMENT 0001

**4. Date Incorporated or Qualified
To Do Business in Florida**

5/24/78

5. FEI Number

59-1972322

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

Tonna Kenoyer

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

2669 W. Gulf Drive

Suite, Apt. #, Etc.

City

Sanibel,

State
FL

Zip Code

33957

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

REGISTERED AGENT MUST SIGN

Date

5/2/01

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/D	French, Ron M.	R.R.#2 Bobcaygeon.	Ontario, CA K0M1A0
VP/D	Brunson, Jimmie	1809 SW 91st St	Gainesville, FL 32607
ST/D	Birk, Ronald F.	3909 Lithea Ridge Blvd.	Valrico, FL 33594-6401
D	Urkovich, Ronald S.	5690 Pine Tree Dr.	Sanibel, FL 33957
D	Prominski, Henry J.	P.O. Box 540	Weirsdale, FL 32195
D	Green, David C.	339 Clough St.	Waterloo, Iowa 50701

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:

Ronald S. Urkovich
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald S. Urkovich

Date

5/9/01

Daytime Phone #

941-472-9082

CR2E081 (8/00)