

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 MAY 15 PM 12:47

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 747887

1. Corporation Name

Longboat Key Club Association, Inc.

2. Principal Office Address - No P.O. Box #

2033 Main Street

Suite, Apt. #, etc.

Suite 600

City & State

Sarasota, FL

Zip

34237

Country

USA

3. Mailing Office Address

2033 Main Street

Suite, Apt. #, etc.

Suite 600

City & State

Sarasota, FL

Zip

34237

Country

USA

REINSTATEMENT 96-08
B 5/15/08
300129591413
05/15/08--01004--019 **971.25

CR2E081 (12/07)

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

6/29/1979

5. FEI Number

59-2229315

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

Icard, Merrill, Cullis, Timm, Furen & Ginsburg, P.A. (attn: Michael J. Furen)

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

2033 Main Street

Suite, Apt. #, Etc.

Suite 600

City

Sarasota

State

FL

Zip Code

34237

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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.

ICARD, MERRILL, CULLIS, TIMM, FUREN & GINSBURG, P.A.

Signature of

Registered Agent

By: Michael J. Furen

Date

5-14-08

Michael J. Furen, Chairman

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
Dk.	ROBERT M. WHITE	435 L'AMBIANCE DR #406	LONGBOAT KEY FL 34228
D.	MICHAEL SEERY	535 SANCTUARY DR #A601	LONGBOAT KEY FL 34228
D.	ROBERT BETAGOLE	90 LIGHTHOUSE BLVD	LONGBOAT KEY FL 34228
D.	LAURENCE A. MERRIMAN	415 L'AMBIANCE DR #808	LONGBOAT KEY FL 34228
D.	BARBARA BRIZDIS	415 L'AMBIANCE DR #708	LONGBOAT KEY FL 34228

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 contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/13/08

Date

Daytime Phone #

941-383-0842