

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 MAY 19 AM 10:17

DOCUMENT # 754745

1. Corporation Name

Kiwanis Club of Lake Jackson, Inc.

200130897902  
06/05/08--01013--006 \*\*673.75

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

4217 Ben Blvd

Suite, Apt. #, etc.

3. Mailing Office Address

4217 Ben Blvd

Suite, Apt. #, etc.

City & State

Tallahassee FL

City & State

Tallahassee, FL

Zip

32303

Country

US

Zip

32303

Country

US

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

591864597

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

~~Terrell Collier~~ Keith M. Roberts

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

~~2048 Cynthia Dr~~ 4217 Ben Blvd

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32303

☒ 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.

Signature of  
Registered Agent

*Keith M. Roberts*  
REGISTERED AGENT MUST SIGN

Date

May 19, 2008

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip    |
|--------|--------------------------------------|---|-----------------------|
| P      | Jackie Larson                        | 3601 Fred George Ct.                              | Tallahassee, FL 32303 |
| VP     | Heather Dieter                       | 2230 Manobrell Ct.                                | Tallahassee, FL 32303 |
| S      | Keith M. Roberts                     | 4217 Ben Blvd                                     | Tallahassee FL 32303  |
| D      | Earl Cushing                         | 5338 Gateway Dr.                                  | Tallahassee FL 32303  |
| D      | Harbert Smith                        | 2048 Cynthia Dr.                                  | Tallahassee FL 32303  |
| D      | Rex Thomas                           | 2107 Faulk Dr.                                    | Tallahassee FL 32303  |

10. I certify that I am an officer or director or the receiver or trustee and I execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the corporation has been in good standing and 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 that the 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 correct and the signature shall have the same legal effect as if made under oath.

SIGNATURE:

*Keith M. Roberts*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KEITH M. ROBERTS, SEC.

Date

5/19/08

Daytime Phone #

850 606-1610