

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

182

**CORPORATION
REINSTATEMENT**



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

FILED
Jul 11, 2002 8:00 A.M.
Secretary of State

DOCUMENT # 759123

1. Corporation Name

Naples Dockside Condominium Association, Inc.

2. Principal Office Address

1323 Chesapeake Ave

Suite, Apt. #, etc.

2B

City & State

Naples, FL

Zip

34102

Country

USA

3. Mailing Office Address

1323 Chesapeake Ave

Suite, Apt. #, etc.

2B

City & State

Naples, FL

Zip

34102

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-2555048

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

Pete Schoenauer

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

1323 Chesapeake Ave

Suite, Apt. #, Etc.

2B

City

NAPLES

State
FL

Zip Code

34102

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

(Signature)

REGISTERED AGENT MUST SIGN

Date

6-10-02

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	Daniel Kahn (D)	1323 Chesapeake Ave #1B	Naples / FL / 34102
V/S	David Crouch (D)	1323 Chesapeake Ave #2A	Naples / FL / 34102
T	Pete Schoenauer (D)	1323 Chesapeake Ave #2B	Naples / FL / 34102

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:

(Signature)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6-10-02

Daytime Phone #

CR2E001 (9/01)

232

Pete Schoenauer
1323 Chesapeake Ave. #2B
Naples, FL 34102

June 7, 2002

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Naples Dockside Condominium
Document # 759123
FEI #59-2555048

This letter serves as notice that the above-mentioned corporation did not receive a Uniform Business Report (annual report) in year 2001 and in 2002. Please let this letter waive all fines and penalties. Enclosed is the corporation reinstatement form as well as a check for \$122.50 that will cover 2001 and 2002 non-profit filing fees.

Thank you,



Pete Schoenauer
Registered Agent
Treasurer

Encl..