

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
2007 JAN 26 AM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 764661

1. Corporation Name

Florida East Coast Dachshund Club Inc.

700087201567
02/05/07--01003--001 **796.25

CR2E081 (1/07)

2. Principal Office Address No P.O. Box #
98 Cuyahoga Rd

3. Mailing Office Address
98 Cuyahoga Rd

Suite, Apt #, etc.

Suite, Apt #, etc.

City & State
Lake Worth, FL

City & State
Lake Worth, FL

Zip
33467

County
Palm Beach

Zip
33467

County
Palm Beach

4. Date Incorporated or Qualified To Do Business in Florida Aug 23, 1982

14-1986572

☐ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee req for a Certificate of Stat

7. Name and Address of Current Registered Agent

Vicki Watts

98 Cuyahoga Rd

Lake Worth

State
FL 33467

☒ 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

Vicki Watts

REGISTERED AGENT MUST SIGN

Date Jan 23, 2007

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	Steve Campbell	4186 SE Fairway Ct	Stuart FL 34997
V	Hanna Libera	5114 51 Ave	Coconut Creek FL 33073
S	Jean Underwood	6543 SW 77 Terrace	Miami FL 33143
T/D	Vicki Watts	98 Cuyahoga Rd	Lake Worth FL 33467
D	Gary Cuica	3155 Mary St	Coconut Grove FL 33133
D	Carol Klein	534 NE 94 St	Miami Shores FL 33138

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:

Vicki Watts Vicki Watts

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 23, 2007

Date

561-963-4161

Daytime Phone #