PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

FRATERNAL ORDER OF EAGLES GATEWAY AERIE #4018 L

The Party Control of the Control of

97 DEC 22 AM 8: 37

SECRETARY OF COAS

AKE PARK, FLORIDA, INC.					TALLAHASSEE FLORIDA		
Principal Place of Business Mailing Addr			ess		1 (881)) (881		
855-957-PARK AVENUE LAKE PARK FL 33169		955-957-PARK AVENUE LAKE PARK\FL 33403					
					REIN	STATEME	NT U
If above a	nddresses are incorrect in any way, line the nelpal Office Address, if Applicable	nformation and enter ng Office Address, If		4 Date Incom	orated or Qualified	wen/hamberstrown	
804 10th st 804			11TH ST		To Do Business in Florida 11/08/1982		
Sulte, Apt. #, etc. Suite, Apt. #,			e1C.		5. FEI Numbe	r	Applied For
City & State LAKE PARK FL. City & State L. 19 K. S.					6.	59-2243656	Not Applicable
Zip Country Ph. m SEACH Zip 334			3 PALM BEACH CERTIFICA		E OF STATUS DESIRED 🔲	\$8.75 Additional Fee required for a Certificate of Status	
7. Names	and Street Addresses of Each Officer and	or Director (Flo					
Title(s)	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)			City / State / Zip		
8	NUTAITIS, CHARLES	5400 N DIXIE HWY 8-7			W PALM BEACH FL		
D GORDON, HUGH, DWILLIAM NEW TON			2531 CONROY DR			LAKE PARK FL	
			2301 PIN COURT			Prim BEACH GARDENS	
D	SULLIVAN, JERRY	9152 PEBBLES ROAD			LAKE PARK FL		
D	BLANCHARD, MARK	4250 74 ST.			RIVERIA BCH. FL		
P	ANDERSON, NORMAN		1501 CRESCENT CIRCLE		LAKE PARK FL 02.23-01		
D ,	DEMONSTRANTI, JOE DAVIS 1	36 YACHT CLUB DR.			N. PALM BEACH FL		
	B. Name and Address of Current		1013 RIV	ERSIBE DR		PAIN DENCH	GARVENS
	B. Name and Address of Current	Registered Age	nt	Name	9. Name and	Address of New Register	red Agent
NUTAITIS, CHARLES				wante			
5400 N DIXIE HWY				Street Address (P.O. Box Number is Not Acceptable)			
W PALM BEACH FL 33407			Suite, Apt. #, Etc.		4	100002382 7740 -12/24/97 <u>-01093-</u> 012	
				****236 , 25 ° *** *236 , 2 5°			## ##\$P\$236,25
10. I, being	appointed the registered agent of the abo	ove named corpo	ration, am familiar w	ith and accept the ob	ligations of Sect	ion 607.0505, F.S.	
Sign ture o Regulared	Agent Okurla Fil	guitais GISTERED AG	And MUST SIGN			Date /// 19/	97
	is corporation owes or he angible Personal Proper			ar Yes 🗌	No 🗌		r side for information ntangible tax.)
this rein	that I am an officer or director or the receistatement application, the reason for dissort the corporation have been paid and the implication is true and accurate, and my six	olution has been names of Individ	eliminated, the corpo uals listed on this for	orate name satisfies t m do not qualify for a	the requirements an exemption un	of section 607.0401 or 61	7.0401, F.S., that all fees

SIGNATURE: Charles Trustanti: CHARLES NOTAIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES NUTAINIS