PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
02 JAN -9 AM 11:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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-01/16/02--01017--012
****358.75 ****358.75

REINSTATEMENT 99-02

DOCUMENT # 765934

1. Corporation Name

SUNRUNNERS MOTORCYCLE CLUB OF POLK COUNTY, INC.

2. Principal Office Address	**3.** Mailing Office Address
6099 WATERWOOD WAY	6099 WATERWOOD WAY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BARTOW, FLORIDA	City & State: BARTOW, FLORIDA
Zip: 33830 Country: USA	Zip: 33830 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 12/02/1982

5. FEI Number: NOT APPLICABLE ☐ 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: RICK LONG

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****70.00 ****70.00

Street Address (P.O. Box Number is Not Acceptable): 303 E. HUNTER RD.

Suite, Apt. #, Etc.:

City: PLANT CITY State: FL Zip Code: 33565

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: Rick Long
REGISTERED AGENT MUST SIGN

Date: 5-8-01

CR2E051 (9/97)

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
PD	BURKETT, ERNEST W.	1120 Hill Ct. E.	Bartow, Florida
TD	MYERS, TIM	7515 W. ~~Piece~~ Pierce Harwell Rd.	Plant City, Florida
D	KELLEY, RANDALL	2620 Civitan Ave. E.	Lakeland, Florida
D	NOEL, BERNARD	3121 Ellis Ave.	Lakeland, Florida
D	LONG, RICK	303 E. Hunter Rd.	Plant City, Florida

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: Rick Long 5-8-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #