

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 OCT 29 PM 4:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F98000005524

1. Corporation Name

Southern Water Sports, Inc.

2. Principal Office Address

103800 Overseas Hwy

Suite, Apt. #, etc.

3. Mailing Office Address

1954 Hwy 54, West

Suite, Apt. #, etc.

City & State

Key Largo, FL

Zip

33037

Country

USA

City & State

Fayetteville, GA

Zip

30014

Country

USA

REINSTATEMENT 02-04

4. Date Incorporated or Qualified
To Do Business in Florida

10/02/1998

5. FEI Number

58-2416656

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

Robert N. Carawan

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

201 West Canal Drive

Suite, Apt. #, Etc.

City

Key Largo

State

FL

Zip Code

33037

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

Robert N. Carawan

REGISTERED AGENT MUST SIGN

Date 10/28/04

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
CP	Robert N. Carawan	201 W. Canal Dr.	Key Largo, FL 33037
VP	Wesley B. Dunn	104500 Overseas Hwy #2403	Key Largo, FL 33037
VP	John A. Stuart	119 Bluebird Rd.	Tavernier, FL 33070
S/T	Kimberly G. Carawan	1954 Hwy 54, West	Fayetteville, GA 30014

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kimberly G. Carawan

10/28/04

Date

770-487-16609

Daytime Phone #

CR2ED01 (01/04)