

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

DOCUMENT # **G18591**

1. Corporation Name:

**THE BEACH HOUSE OF FORT MYERS BEACH INC.**

98 JUN 25 AM 10:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

**4960 ESTERO BLVD.  
FORT MYERS BEACH  
FLORIDA 33931**

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT

600002575516-98

-06/30/98--09097--001

4. Date Incorporated or  
To Do Business in Florida  
**JANUARY 12, 1983**

5. FEI Number

**59-2284423**

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	JAMES S. HARRIS	4 FAIRVIEW BLVD <del>FT. MYERS Bch. FL 33931</del>	FT. MYERS Bch. FLORIDA 33931
SM	ROBERT A. BARTER	4969 ESTERO BLVD.	FT. MYERS Bch FLORIDA 33931
T	ANDREY M. HARRIS	4 FAIRVIEW BLVD.	FT. MYERS Bch. FLORIDA 33931
D	H. GORDON SMITH	4960 ESTERO BLVD	FT. MYERS Bch FL 33931
D	MADALEN SMITH	4960 ESTERO BLVD.	FT. MYERS Bch FL 33931
D	MARION A. HARRIS-BARTER	4969 ESTERO BLVD.	FT. MYERS Bch FL 33931
D	BEVERLY FURLONG	4960 ESTERO BLVD.	FT. MYERS Bch. FL 33931

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**RICHARD DOBOEST.  
PO BOX 1480  
FORT MYERS, FL. 33902**

Name

**ROBERT A. BARTER**

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

**4969 ESTERO BLVD**

Suite, Apt. #, Etc.

City

**FT. MYERS Bch.**

State

**FL**

Zip Code

**33931**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

**ROBERT A. BARTER**

REGISTERED AGENT MUST SIGN

Date **JUNE 22, 1998**

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information  
on intangible tax.)

12. 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:

**ROBERT A. BARTER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**JUNE 22/1998 (941)463-4004**

Date

Daytime Phone #