

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

APPROVED  
AND  
FILED

01 DEC 28 PM 2:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # L35553**

**1. Corporation Name**

R & R Charters of the Florida Keys Inc  
176 Coral Rd  
Islamorada Fl 33036

**2. Principal Office Address**

176 Coral Rd

Suite, Apt. #, etc.

**City & State**

Islamorada Fl

**Zip**

33036

**Country**

Monroe

**3. Mailing Office Address**

176 Coral Rd

Suite, Apt. #, etc.

**City & State**

Islamorada Fl

**Zip**

Fl. 33036

**Country**

Monroe

**REINSTATEMENT**

**4. Date Incorporated or Qualified  
To Do Business in Florida**

12-11-89

**5. FEI Number**

65-0146186

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**

Virginia L. Gargan

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

176 Coral Rd

Suite, Apt. #, Etc.

**City**

Islamorada

**State**

FL

**Zip Code**

33036

**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

Virginia L. Gargan

REGISTERED AGENT MUST SIGN

Date 12-27-01

**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	John J. Gargan Jr	176 Coral Rd	Islamorada Fl 33036
VPD	Virginia L. Gargan	176 Coral Rd	Islamorada Fl 33036

**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:**

Virginia L. Gargan

Virginia L. Gargan 12-27-01

Date

Daytime Phone #

305-

451-3464

CR2ED81 (9/00)