

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

APPROVED  
AND  
FILED

01 DEC 21 PM 4:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N00000003946

1. Corporation Name

CLUBSIDE III AT PELICAN STRAND CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

9400 GLADIOLUS DR., STE. 250  
FT. MYERS FL 33908

Mailing Address

9400 GLADIOLUS DR., STE. 250  
FT. MYERS FL 33908

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

2. New Principal Office Address, If Applicable

~~205 Airport Road Suite 250~~

City & State

Naples, FL  
34104 Collier

3. New Mailing Office Address, If Applicable

~~205 Airport Road Suite 250~~

City & State

Naples, FL  
34104 Collier

REINSTATEMENT

4. Date Incorporated or Qualified  
To Do Business in Florida

06/09/2000

5. FEI Number

65-1026193

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 3	City / State / Zip 4
<del>D</del>	<del>REISMAN, JOHN</del>	<del>9400 GLADIOLUS DR., STE. 250</del>	<del>FT. MYERS FL 33908</del>
<del>D</del>	<del>GULLO, VINCE</del>	<del>9400 GLADIOLUS DR., STE. 250</del>	<del>FT. MYERS FL 33908</del>
<del>D</del>	<del>KNIZNER, DAVID</del>	<del>9400 GLADIOLUS DR., STE. 250</del>	<del>FT. MYERS FL 33908</del>
D	BILL FOOTE	5911 THREE IRON DRIVE #2501	NAPLES, FL 34110
D	JAMES MUNRO	5916 THREE IRON DRIVE #2102	NAPLES, FL 34110
D	JOHN THOMAS	5921 THREE IRON DRIVE #2903	NAPLES, FL 34110

8. Name and Address of Current Registered Agent

PEEPLS, C. PERRY  
8889 PELICAN BAY BLVD., STE. 300  
NAPLES FL 34108

9. Name and Address of New Registered Agent

Real Property Management  
205 Airport Road Suite 250  
Naples, FL 34104

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

*[Signature]*

REGISTERED AGENT MUST SIGN

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-01/11/02--07054--023

Date \*\*\*236.25 / 1/10/25

11. 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

Date

Daytime Phone #

CR2E040 (8/01)