PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

DOCUMENT #

1. Corporation Name

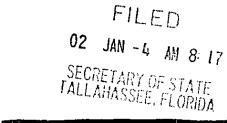
BIG LAKE AIRBOAT CLUB, INC.

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THICH	ואט	PIACE	OI.	DUSII	1655

Mailing Address

848 WEST VENTURA AVENUE CLEWISTON FL 33440

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		incorrect in any way, line t	•					
·			ew Mailing Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida 10/04/2000			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Numbe	5. FEI Number Applied For			
City & State		City & State			_	145716	Not Applicable	
		<u>,</u>				6.		
Zip		Country	Zip		Country	CERTIFICAT	E OF STATUS DESIRED 🔲	8.75 Additional Fee require for a Certificate of Status
7. Names a	and Street Add	dresses of Each Officer an	d/or Director (Flo	orida nonprofit o	corporations must list at l	least 3 directors)		
Title(s)			Street Address of Each Officer and/or Director			City / State / Zip		
Р	JOHNSON, BOBBY		PO BOX 1244			LABELL FL 33975		
٧	TUCKER, FRED		695 E. SR LOT 41			MOORE HAVEN FL 33471		
C ∕ T	WILSON, BOB		PO BOX 1642		MOORE HAVEN FL 33471			
\$/b	SYKES, BILL		PO BOX 1361			MOORE HAVEN FL 33471		
D	SNIDER, ERNEST		2322 NORTH RIVER RD.			LABELLE FL 33935		
	· - • · ·					20004779562-8 01/17/0201005002 ******61.25 ******61.25		
8. Name and Address of Current Registered Agent					Name and Address of New Registered Agent			
YAUN,	JOHN A			•	Name Street Address	(P.O. Box Number	is Not Acceptable)	±10-0-1-
848 W	est ventu	ra avenue			5555656	(5. <u>-5</u>		
CLEWISTON FL 33440				Suite, Apt. #, Etc.				
					City		Sta	ate Zip Code
10. I, being	appointed the	e registered agent of the al	oove named corpo	oration, am fam	illar with and accept the	obligations of Sect		

11. I certify that I are an officer or director or the receive or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that whan filling 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 in

SIGNATURE:

Signature of Registered Agent

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR D Wilson, Treasurer

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Yaun

BEGISTERED AGENT MUST SIGN

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