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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. JUN 16 PM 4:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		CR2E081 (12/07)	
DOCUMENT # N05000004273					
1. Corporation Name CAMP SUNSHINE INTERNATIONAL, INC.					
2. Principal Office Address - No P.O. Box # 5076 Egret Point Circle Suite, Apt. #, etc.			3. Mailing Office Address 5076 Egret Point Circle Suite, Apt. #, etc.		
City & State Boca Raton, Florida Zip 33431		City & State Boca Raton, Florida Zip 33431		4. Date Incorporated or Qualified To Do Business in Florida 4/25/2005	
Country USA		Country USA		5. FEI Number 20-2734033 Applied For / Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☒ 63.75 Additional Fee required for a Certificate of Status					
7. Name and Address of Current Registered Agent Name: Larry Gould Street Address (P.O. Box Number is Not Acceptable): 5076 Egret Point Circle Suite, Apt. #, Etc.: City: Boca Raton State: FL Zip Code: 33431				☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the provisions of sections 607.0505 or 617.0503, F.S. Signature of Registered Agent: <i>[Signature]</i> REGISTERED AGENT MUST SIGN Date: 6/16/2008					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip		
D	Larry Gould	5076 Egret Point Circle	Boca Raton, FL 33431		
D	Martin Gould	250 Durham Street	Easton, PA 18042		
D	David Gorin	1199 Meadow Green Lane	McLean, VA 22102		
D	Griffin Gould	4439 Rebel Valley View	Atlanta, GA 30339		
D	Alison Gould	4439 Rebel Valley View	Atlanta, GA 30339		
	SEE ATTACHED LIST.				
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 contained in Chapter 118, 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: <i>[Signature]</i> 6/16/2008 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

REINSTATEMENT

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Attachment to [Corporate Reinstatement Form for Camp Sunshine International, Inc.] 2008 JUN 16 PM 4:14

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9. (Continued) Names and Street Addresses of Each Officer and/or Director

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City/State/Zip
D	Don Toms	Post Office Box 130	South Casco, ME 04077
D	Paul Chorney	1191 East Versailles Drive	Oro Valley, AZ 85755
D	Shirley Chorney	1191 East Versailles Drive	Oro Valley, AZ 85755
D	Larry Dumont	250 Durham Street	Easton, PA 18042

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TALLAHASSEE, FLORIDA

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Division of Corporations
Fax Number : (850) 617-6384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

CORPORATION REINSTATEMENT

CAMP SUNSHINE INTERNATIONAL, INC.

Certificate of Status	0
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Page Count	03
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Corporate Filing Menu

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