

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 SEP 14 AM 10:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **1105591**

1. Corporation Name

The Riverdale Wildcats, Inc.

REINSTATEMENT 96-06

2. Principal Office Address

9800 Buckingham Rd

Suite, Apt. #, etc.

City & State
Fort Myers

Zip
33905

Country
USA

3. Mailing Office Address

P. O. Box 50953

Suite, Apt. #, etc.

City & State
Fort Myers

Zip
33994

Country

CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number
91-1874351

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
Jerry Davis Sr.

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

Suite, Apt. #, Etc.

City
Fort Myers

State
FL

Zip Code
33913

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

Jerry Davis Sr.
REGISTERED AGENT MUST SIGN

Date
9-8-06

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
P	Jerry Davis Sr.	835 Urchin Circle	Fort Myers, FL 33913
V	Robert Lorenz	1210 Nuna Avenue	Fort Myers, FL 33905
T	Gerald Crawford	838 Dellena Lane	Fort Myers, FL 33905

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 119, 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:

Jerry Davis Sr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-8-06
Date

Daytime Phone #