## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	RPORATION ISTATEMENT		Secretary	MENT OF STATE of State RPORATIONS	09	FILED AUG II AMII: 40	
DOCUMENT # N06000012757  1. Corporation Name  ROTARY CAUB OF					ALL	AHASSEE.FLORIDA	
POMPANO BEACH-LIGHTHOUSE INC. FUND							
W09-33921					002	0158807680 61.609400 **70.00	
2. Principal Office Address - No P.O. Box # 3. Mailing C			Office Address		07/22/0		
1103 N. Federal HWY 1505 E. F			líver Dr.		11/18/0	8 OLOUTOU 70.00	
Suite, Apt. #, etc. Suite, Apt. #,			etc.		nc:	NSIAIENIENI 07-09	
						porated or Qualified iness in Florida	
City & State City & State					7		
Pompano Beach,FL. Margat			, FL		5. FEI Number Applied For 30-0428185 Not Applica		
Zip	Country Zip		Country		6		
33062	USA	33063		JSA	CERTIFICAT	E OF STATUS DESIRED L. So.73 Automoral Fee Teq.	
	7. Name and Add	ress of Current Regis	stered Agent				
Name William J. Zobus					The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you		
Street Address (P.O. Box Number is Not Acceptable) 1505 E. River Dr.							
Suite, Apt. #, Etc.						are certifying the prior notices were no received and requesting the reinstatemen	
City Margate	е		tate Zip Code 33063	fee be waived.			
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 (M/M) 3							
Registered Agent					Date <u>JUly 17, 2009</u>		
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)							
Titles	Officers and/or Directors		Officer and/or Director			City / State / Zip	
P	Robert L. Repass	3221 NE 14th Ave.			Pompano Beach, FL. 33064		
s	William J. Zobus	1505 E. River Dr.			Margate, FL. 33063		
Τ	Jack Rosen	2505 Antiqua Ter. K3			Coconut Creek, FL. 33066		
					<del>-                                      </del>	SSS07CON	
· · · · · · · · · · · · · · · · · · ·			·		08/11/09-	58807680 -01010002 **52.50	

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 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 contained in Chapter 119, F.S. The information indicate on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

William John WILLIAM J. ZOBOS JULY 17, 2009 954 972-7178