-- ₱LEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMEN'



FLORIDA DEPARTMENT OF STATE Glenda E. Hôod Secretary of State

Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT #	N07880
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1. Corporation Name

APOLLO BEACH CHAMBER OF COMMERCE, INC.

Principal Place of Business

Mailing Address

6432 HWY. 41 N APOLLO REACH EL 33572 6432 HWY, 41 N APOLLO BEACH FL 33572 FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

MEMBIAIEMENT	B

APOLLO BEAGN PL 33372					MEINDIAI EMENT D			
	ddresses are incorrect in any way, line th ncipal Office Address, If Applicable	nformation and enter correction below. ng Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida 02/27/1985				
Suite, Apt. #, etc. Suit			Suite, Apt. #, etc.			5. FEI Number Applied For		
City & State)	City & State			59-2622690 Not Applicable			
-Zip	Country	Zip	Count	ry	6. CERTIFICATE		Additional Fee required Certificate of Status	
7. Names	and Street Addresses of Each Officer and	/or Director (Flo	rida nonprofit corpor	ations must list at le	ast 3 directors)			
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director			City / State / Zip			
PD ·	SCHELLER, BRUCE Colin Howaid	PO-BOX 3646- 1020 Bal Harbor Drive		Drive.	APOLLO BEACH FL 33572			
VP	PHAGAN, RICHARD	6330 COCCOA LANE 839 Birdie Way			APOLLO BEACH FL 33572			
SD	CALVIN, LEE Donta Marti	3024-61. AT 674- 6120 US Huy 41 N			RUSKIN FL 33570 Apollo Bead	z, FL 33572		
TD				to Beach f		APOLLO BEACH FL 33572		
					90 10/21/	002398023 0301107013 **	9 61.25	
	8. Name and Address of Curren	Registered Ag	ent		Name and Address of New Registered Agent			
				Name	•		9	
PETERSON, MICHAEL L				Street Address (P.O. Box Number is Not Acceptable)				
218 APOLLO BEACH BOULEVARD APOLLO BEACH FL=33572								
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				City	. 	State	Zip Code	
10. I , bein	g appointed the registered agent of the al	oove named corp	oration, am familiar	with and accept the	obligations of Sec		S.	
Signature Registered	Agep	PEGISTERED A	GENT MUST SIGN			Date 10-16-	03	
44 1 ***	y that I am an officer or director or the rec		***	to this annlication as	provided for in ch	anter 607 or 617, F.S. I further ce	rtify that when filing	
11. I certify this rei	y that I am an officer or director or the rec nstatement application, the reason for dis	solution has bee	n eliminated, the cor	porate name satisfie	s the requirement	s of section 607.0401 or 617.040	, F.S., that all fees	

1. 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, P.S. Hutther certify that when him of 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

11/4/03

Daytime Phone #

CHAMBER OF COMMERCE

October 10, 2003

Florida Department of State Glenda E. Hood, Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Subject: Reinstatement of Corporation for the Year 2003 - Document #N07880

Dear Ms. Hood:

Enclosed please find our application and check for \$61.25 in order to reinstate the Apollo Beach Chamber of Commerce as a Corporation.

We did not receive the necessary paperwork for the yearly fee nor have we received any second notification that this was not paid. Part of the problem could be that the form which you sent us was for the fiscal year 2001 and not for 2002 which was filed on February 20, 2002. A copy of this form which we retrieved from your web site is attached. Therefore, since we have no idea how this problem with not receiving the information occurred, we ask that the reinstatement fee of \$175.00 be waived.

Your assistance in resolving this matter would be greatly appreciated.

Sincerely,

Faye Cook

Faye Coop

Treasurer

Apollo Beach Chamber of Commerce

Encl.

