

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 AUG 12 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

N07902

1. Corporation Name

Collier County One Hundred Club, INC

2. Principal Office Address - No P.O. Box #

2390 Tamiami Trail N

3. Mailing Office Address

Same

Suite, Apt. #, etc.

204

Suite, Apt. #, etc.

City & State

Naples, FL

City & State

Zip

34103-4484

Country

USA

Zip

Country

500159515235
08/12/09--01037--012 **183.75

REINSTATEMENT 07-09

4. Date Incorporated or Qualified
To Do Business in Florida 03/01/1985

5. FEI Number
59-2529757

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
Kathleen C Passidomo

Street Address (P.O. Box Number is Not Acceptable)
2390 Tamiami Trail N

Suite, Apt. #, Etc.
204

City
Naples,

State
FL

Zip Code
34103

☒ 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 obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 7/31/09

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	Joyceanna Rautio	10261 Windsor Way	Naples, FL 34109
V	Patrick O'Connor	9965 Clear Lake Circle	Naples, FL 34109
S.	Charles Horn	4775 Aston Garden Way, #302	Naples, FL 34109
T	Fred Weinman	Northern Trust, 26790 S Tamiami Trail	Bonita Springs, FL 34134
D	Kathleen C Passidomo	2390 Tamiami Trail N, #204	Naples, FL 34103
D	Earl G Hodges	2140 Coach House Lane	Naples, FL 34105

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/09

Date

239-
390-5609

Daytime Phone #