

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham,  
Secretary of State

DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

01 JUN 26 AM 9:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

N30013

1. Corporation Name

Okeechobee Jaycees, Inc.

Principal Place of Business

Mailing Address

2525 NE 131st LN

PO Box 1474

Okeechobee, FL 34972

Okeechobee, FL 34972

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-0144476

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☒

\$875 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
Pres.	Cindy Brandel (D)	2525 NE 131st Ln, Okeechobee, FL 34972	Okeechobee, FL 34972
VP.	Christine Caenuso (D)	2255 NE 131st Ln	Okeechobee, FL 34972
D	Patrick Caenuso (D)	2255 NE 131st Ln	Okeechobee, FL 34972
	542.50 - Adm	AR 542.50	
	61.25 - AR		
	8.75 - Cert		

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Cindy Brandel

2525 NE 131st LN

Okeechobee, FL 34972

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

Cindy Brandel

REGISTERED AGENT MUST SIGN

Date 5-15-01

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information  
on intangible tax.)

12. 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 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:

Cindy Brandel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-15-01  
Date

863-763-5933  
Daytime Phone #

CR2E040 (12/96)