PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	•			_		T	
	PORATION STATEMENT	FLORIDA DEPARTME Secretary of DIVISION OF CORPO	State		SECRE.	TARY OF STATE ASSEE, FLORIC	i.
DOCL	JMENT# N31	054					
1. Corporation Name				74-06			
GLI	HMICI ITAL	CLUB, INC.		EINST	atemen		
	4	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		04/08	105 9007	3 023 \$	1613
2. Principal	Office Address	3. Mailing Office Address	- St W.	07/01/4	05 9067 95 9000 CR2E081 (12/	3 008	6/,-=
Suite, Apt. #, etc. Suite, Apt. #, etc.					CR2E081 (12/	05)	
P# City & State		P.H City & State		4. Date Incorpora To Do Busines			
BRH	HOENTON FL.	BRADENTO	N. FL.	5. FEI Number	52574	4 Applied For Not Applical	_
zip 34	209 USA	zip 34209 co	untry USA	6. CERTIFICATE O	F STATUS DESIRED \$	8.75 Additional Fee required for a Certificate of State	uired
	, , ,,,,,,,	7. Name and Addre	ss of Current Register	ed Agent			
	Name DOMINIC	SPAMPAN	IATO				
	Street Address (P.O. Box Number is N			7 <u>.</u> 02/20	1007778 /AGA1AA4A	5057 09 **61 25	
	Suite, Apt. #_Etc.	<u> </u>		<u> </u>	<u>YES DINGT O</u>	<u> </u>	
	CITY BRADENT	По	Andrews and the second		State Zip Code FL 3420)9	
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 Date 7-3-06 REGISTERED AGENT MUST SIGN							
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 / S	State / Zip	
<u>P</u>	DOMINIC Spam	PANATO 208	77th ST.	W. E	3RADENTON	, FL. 342C	>9
٧P	MARY BORSCA	NI 7116	14th AVE,	NW E	BRADENTON	FL 34209	7
T	ANNE TORRIE	R1 314	76 Th ST.	NW 1	BRADENTO	U.FL. 3420	9
S	7	NO 3302"	f2 nd ST. L	ک، ک	RADENTON	FC 3420	\$
TR.	JENSEN PAU		60th AVE	W. A	BRADENTON	F1 342 A	7
TOB		einski 4008		· W. I	BRADENTION	FL. 34205	
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.							
SIGNA	TURE	5	_	7	2-3-00		
	·····						•

May 20, 2006

TO WHOM IT MAY CONCERN,

REFERNCE # N 31054

On May 1, 2006, at 10:50 a.m., Anne Torrieri, Treasurer, contacted your office regarding Non Receipt of the Not for Profit Corporation (U.B.R.) form.

It was explained to Mr. Gary Blankenbaker, that we have experienced a problem since 2004 regarding the tax payment for the Gli Amici Italian American club.

Again, we are not in receipt of the 2006 form. Therefore, Mr. Blankenbaker is sending a re-instatement form to be completed and returned with a payment of \$61.25 for 2006.

In the event it becomes necessary to contact someone for additional information you may call, Dolores Gocinski, Cores. Sec., 941-756-8970.

Thank you for your assistance in this matter.

very truly yours, Nolores Loceuske

.