

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 DEC 11 PM 12:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N32570

1. Corporation Name

LEE COUNTY ALLIANCE FOR THE MENTALLY ILL, INC.

Principal Place of Business

Mailing Address

2789 ORTIZ AVENUE S.E.
FT MYERS FL 33905
US

2789 ORTIZ AVENUE S.E.
FT MYERS FL 33905
US

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business In Florida

05/26/1989

5. FEI Number

65-0122844

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 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
PD	DIGERNESS, LUELLA	1820 SE 1ST. TERR	CAPE CORAL FL 33990-1353
VP/D	BOERGER, MAUDE	5540 WESTWIND LANE	FT. MYERS FL 33919-2718
TD	BOERGER, JOHN	5540 WESTWIND LANE	FORT MYERS FL 33919-2718
SD	SLUMP, BETTY	1919 SE 6TH TERRACE	CAPE CORAL FL 33990

REINSTATEMENT

200002374562-1

-12/17/97-01037-007

***236.25 ***236.25

56 12-16-97

8. Name and Address of Current Registered Agent

BOERGER, JOHN
2789 ORTIZ AVENUE
FT MYERS FL 33905

9. Name and Address of New Registered Agent

Name

John BOERGER

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

5540 WESTWIND LN.

Suite, Apt. #, Etc.

FORT MYERS

City

State

Zip Code

FL

33919-2718

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

John Boerger

REGISTERED AGENT MUST SIGN

Date

Dec. 9, 1997

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

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:

John Boerger

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dec. 9, 1997

Date

941-481-0127

Daytime Phone #

CP2040 (8/97)