

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

97 SEP -5 PM 1:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N 35627**

1. Corporation Name

KIWANIS CLUB OF PLANT CITY - SUNRISE, INC.

Principal Place of Business

Mailing Address

602 W. Saunders Street
Plant City, Florida 33566

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

2. New Principal Office Address, If Applicable
602 W. Saunders St.

Suite, Apt. #, etc.

City & State
Plant City, FL

Zip Country
33566 U.S.A.

3. New Mailing Office Address, If Applicable
602 W. Saunders St.

Suite, Apt. #, etc.

City & State
Plant City, FL

Zip Country
33566 U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida
12/08/89

5. FEI Number

59-2981978

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
P/D	Ward, Wayne B.	9475 Gallagher Road	Dover, FL 33527
PE/D	Thomas, Bill	5602 Joe King Road	Plant City, FL 33567
S/T/D	Montgomery, Don	2214 Thonotosassa Road	Plant City, FL 33566
D	Draughon, Nettie M.	602 W. Saunders Street	Plant City, FL 33566
D	Hinson, Rick	2508 E. Sam Allen Road	Plant City, FL 33565
(Continued on additional sheet)			

8. Name and Address of Current Registered Agent

Kenneth W. Buchman
212 North Collins Street
Plant City, FL 33566

Name

Nettie M. Draughon

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

602 W. Saunders Street

Suite, Apt. #, Etc.

City

Plant City

State

FL

Zip Code

33566

9. 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

Nettie M. Draughon

REGISTERED AGENT MUST SIGN

Date

9-3-97

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

100002289041 -- 1

-09/10/97--01050--001

****358.75 ****358.75

9-3-97

813- 752-8973

CP25040 (12/96)

Continuation of Item 7 of
Application for Reinstatement

Title	Name of Officers and/or Directors	Street Address	City/State/Zip
D	Penrose, Bill	1309 N. Ferrell Street	Plant City, FL 33566
D	Penrose, Mary	1309 N. Ferrell Street	Plant City, FL 33566
D	Ward, Paige	9475 Gallagher Road	Dover, FL 33527
D	Knighten, Timothy	103 S. Elm Street	Plant City, FL 33566