

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1052

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 MAR -2 PM 12:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *N 36275*

1. Corporation Name

Beach Bay Optimist Club, Inc.

2. Principal Office Address

16804 Castile Ave.

Suite, Apt. #, etc.

City & State

Panama City Beach, FL

Zip

32413

Country

Bay

3. Mailing Office Address

16804 Castile Ave.

Suite, Apt. #, etc.

City & State

Panama City Beach, FL

Zip

32413

Country

Bay

REINSTATEMENT 03-05

4. Date Incorporated or Qualified
To Do Business in Florida

01/19/1990

5. FEI Number

592979130

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

John W. Foster

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

16804 Castile Ave.

Suite, Apt. #, Etc.

200048045402
*03/22/05--01019--003 **218 75*

City

Panama City Beach

State

FL

Zip Code

32413

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

John W. Foster

REGISTERED AGENT MUST SIGN

Date *02-20-2005*

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
<i>P</i>	<i>Hart, Julie</i>	<i>16404 E. Lullwater Dr.</i>	<i>Panama City Beach, FL 32413</i>
<i>ST</i>	<i>Foster, Barbara</i>	<i>16804 Castile Ave.</i>	<i>Panama City Beach, FL 32413</i>
<i>V</i>	<i>Lisa Long</i>	<i>1331 Moon Court</i>	<i>Southport, FL 32409</i>
<i>D</i>	<i>Patricia Suiter</i>	<i>5409 Sunset Ave.</i>	<i>Panama City Beach, FL 32408</i>
<i>D</i>	<i>Gayle Newman</i>	<i>211 S. Wells St.</i>	<i>Panama City Beach, FL 32413</i>
<i>D</i>	<i>John Newman</i>	<i>211 S. Wells St.</i>	<i>Panama City Beach, FL 32413</i>

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 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:

Barbara Foster, Sec./Treas.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-20-2005 850-233-9232

Date

Daytime Phone #

CR2001 (01/05)

20x2

BEACH BAY OPTIMIST, INC.
16804 CASTILE AVE.
PANAMA CITY BEACH, FL.
32413

JULIE P. HART, PRESIDENT
BARBARA M. FOSTER, SECRETARY/TREASURER

February 20, 2005

TO: FLORIDA DEPT. OF STATE
DIV. OF CORPORATIONS

PLEASE BE ADVISED THAT THIS CLUB DID NOT RECEIVE THE
RENEWAL APPLICATIONS FOR CORPORATION STATUS, POSSIBLY DUE TO
THE FACT THAT WE NO LONGER HAVE THE POST OFFICE BOX SHOWN ON
THE EARLIER FORMS.

WE WOULD APPRECIATE YOUR WAIVING THE REINSTATEMENT FEES
INVOLVED.

THANK YOU.



BARBARA M. FOSTER
SECRETARY/TREASURER