

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



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

RECEIVED
AND
FILED

1997 NOV 12 AM 9:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N44555

1. Corporation Name

The Pelican Players Community Theatre, INC

Principal Place of Business

1515 Yorktown Dr
Lawrenceville GA 30043

Mailing Address

3770 19 Ave SW
NAPLES FL
33964

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

2. New Principal Office Address, If Applicable

10364 QUAIL CROWN Dr
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

10364 QUAIL CROWN Dr
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

8/7/91

5. FEI Number

65-0138838

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)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
PD	John LANHAM	10364 QUAIL CROWN Dr	NAPLES FL 34119
D	B.J. Brody	129 Erie Dr	NAPLES FL 34110
D	ELAINE BARAN	1515 YORKTOWN Dr	LAWRENCEVILLE GA 30043

8. Name and Address of Current Registered Agent

John Lanham
~~1515 YORKTOWN~~ 10364
QUAIL CROWN Dr
NAPLES FL 34119

9. Name and Address of New Registered Agent

Name
800002346658--6
Street Address (P.O. Box Number is Not Accepted)
1113797--01080--004
Suite, Apt. #, Etc.
*****70.00 *****70.00
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

John A. Lanham
REGISTERED AGENT MUST SIGN

Date

11/7/97

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:

John A. Lanham JOHN A. LANHAM
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/7/97 (404) 562-5745

CR2E040 (12/95)



Pelican Players Community Theatre, Inc.

1515 Yorktown Dr, Lawrenceville GA 30243

November 7, 1997

Sandra Mortham
Florida Secretary of State
Division of Corporations
PO Box 6327
Tallahassee FL 32314

Dear Ms. Mortham:

Enclosed is the request for reinstatement of the Pelican Players Community Theatre, Inc. Last June, I spoke with your representative, M. Hodges, about a missing annual report for the corporation. I am temporarily residing outside of Florida and the report was not forwarded. A week later, I received the report and filed it with a request for the Certificate of Status. I never received the Certificate and missed it when I began making plans to return to Florida in December 1997. I contacted your office and was informed that the corporation was dead.

Please accept this request and reinstate our standing in Florida. We would like to resume productions in Naples in Spring 1998. Thank you for your kind attention.

Sincerely,

John A. Lanham
President, Pelican Players