APPROVED AND FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION FOR REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

99 NOV 18 PM 12:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000000959

1. Corporation Name

FLORIDA DAY CRUISE ASSOCIATION, INC.

REINSTATEMENT 97-99

Principal Place of Business / Mailing Address

1776 Wood Haven Street
Tarpon Springs, FL 34689

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: 2-22-94

5. FEI Number: 65-047-3274 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑

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 |
|---|---|---|---|
| Pres/D | Lester E. Bullock | 6160 Sundown Drive | St. Petersburg, FL 33709 |
| V.P/D | Greg Karan | 198 Seminole Street | Clearwater, FL 33755 |
| Sec/D | John Brevick | 101 George King Blvd.Ste 3 | Cape Canaveral, FL 32920 |
| Treas/D | Denny Blankenship | 4738 Ocean Street | Mayport, FL 32233 |
| | | | |
| | | | |

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8. Name and Address of Current Registered Agent

Glenn G. Kolk
520 Brickell Key Drive
Suite 1606
Miami, FL 33131

9. Name and Address of New Registered Agent

Name: Jean M. Walder
Street Address (P.O. Box Number is Not Acceptable): 1776 Wood Haven Street
Suite, Apt. #, etc.:
City: Tarpon Springs State: FL Zip Code: 34689

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: Jean M. Walder Date: 11/15/99
REGISTERED AGENT MUST SIGN

11. This corporation owes 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: SEE ATTACHED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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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 effects as if made under oath.

SIGNATURE: Denny Blankenship 11/17/1999 727-944-4343

Signature and Typed Name of Signing Officer or Director | Date | Daytime Phone #