

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2007 JAN 17 AM 10:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000005509

1. Corporation Name

Sunrise children's foundation, Inc.

2. Principal Office Address

4910 Tamiami Tr N

Suite, Apt. #, etc.

Suite 316

City & State

Naples FL

Zip

33940

Country

USA

3. Mailing Office Address

4910 Tamiami Tr N

Suite, Apt. #, etc.

Suite 316

City & State

Naples FL

Zip

33940

Country

USA

REINSTATEMENT 05-07

CR2E081 (12/05)

**4. Date Incorporated or Qualified
To Do Business in Florida**

11/7/1994

5. FEI Number

16-0537158

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$5.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Ertag, William D., M.D.

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

720 Goodlette Road

Suite, Apt. #, Etc.

Suite # 204

City

Naples

State

FL

Zip Code

33962

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

✓ *William Ertag*

Date

1/11/07

REGISTERED AGENT MUST SIGN

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
P	William D. Ertag, M.D.	720 Goodlette Rd N # 204 Naples FL 34102	Naples FL 34102
S	Bonnie Dessauer	23148 Grassy Pine Dr.	Estero FL 33928
T	Ed Mace	720 Goodlette Rd	Naples FL 34102
D	Gina Juneau	4782 Lakewood Blvd	Naples FL 34112
D	Chaelotte Bremseth	490 Ibis Way	Naples FL 34110
D	Craig Timmins	3838 Tamiami Tr N # 402	Naples FL 34103

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 contained in Chapter 119, 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 #

✓ *William Ertag*

1/11/07

1/3

1/18/07

Sunrise Children's Foundation, Inc.

Document #N94000005509

Reinstatement

Box 9:

Additional Directors

D Edward Wollman 5129 Castello Drive, Suite 1 Naples, FL 34103

3/3

Sunrise Children's Foundation, Inc.
4910 Tamiami Trail North
Suite 316
Naples, FL 33940

January 2, 2007


Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: N94000005509

To Whom It May Concern:

Enclosed please find a completed reinstatement for Sunrise Children's Foundation, Inc. Also enclosed is a check in the amount of \$187.50, which is payment for the \$62.50 corporate fee for the years 2005 through 2007. The Foundation did not receive the annual report notice in 2005.

Thank you,



William D. Ertag, M.D.
President