PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

DOCL	JMFN	T #	N96000	001932
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1. Corporation Name

ROBERT H.L. DABNEY POST 192, THE AMERICAN LEGION, INC.

3130 Dr. Martin Luther King Jr. Blvd Dr. Martin Luther King Jr. Blvd.

2. Principal Office Address 3130 Dr. Martin Luther King Jr. Blvd		3. Mailing Office Address Dr. Martin Luther King Jr. Blvd.		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State Fort Myers, FL		City & State Fort Myers, FL		
Zip 33916	Country USA	Zip 33916	Country USA	

04 NOV -9 AM 11: 34 SECHLIARY OF STATE TALLAHASSEE, FLORIDA

Date Incorporated or Qualified To Do Business in Florida	M	
FEI Number 65-0701296	Appile Not Ac	d For

CERTIFICATE OF STATUS DESIRED

					joi a certificate of
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7. Name and Address of C	urrent Registered Agent			
Name Charles E. Henry Sr.				-	
Street Address (P.O. Box Number is No 1839 Henderson Ave.	t Acceptable)				
Suite, Apt. #, Etc.				· · · · · · · · · · · · · · · · · · ·	
City Fort Myers	<u>, , , , , , , , , , , , , , , , , , , </u>		State FL	Zip Code 33916Pres	<u></u>
appointed the registered agent of the show	e named compression, am familiar with a	nd accept the obligations of s	ection 607 05	05 or 617 0503 F	F S

Signature o Registered		ENT MUST SIGN	Date 11/04/04
9. Name	s and Street Addresses of Each Officer and/or Director (Flo	rida 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
ΡĎ	Charles E. Henry Sr.	1839 Henderson Ave.	Fort Myers, FL 33916
V PD	Joseph Taylor Jr.	2 Castle Bar Circle	FortMyers, FL 33905
TD	Joseph Taylor Sr	35 SW 13thStreet	Cape Coral, FL 33991
SD	Robert McClain Assets Assets	3409W15t Street A 100 1 1 000 1 000	
	利用 BRICA 1958・4条7861 日マビロロ	I 11.70	00042609837 3/0401081019 **61.25
	CHEER LEVINE 1962		

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 filling 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.

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SIGNATURE AND TYPED OR PRINT	ED NAME OF SIGNING OFF	SER OR DIRECTOR	

Daytime Phone #

'AMÉRICAN LEGION ROBERT H. L. DABNEY POST 192

2012

Department of State
Division of Corporations
P.O.Box6327
Tallahassee, FL 32314

November 3, 2004

To Whom It May Concern:

This letter is to certify that The Robert H.L. Dabney Post 192, The American Legion, Inc. did not receive prior notices or application from the Division of Corporations.

Sincerely,

Charles E. Henry Sr., President