PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PORATION	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED OLYMAY I PM 5: 16
DOCUMENT # N9600002179 1. Corporation Name Destin Optimist Club, Inc.			SECRETARY OF STATE SECRETARY OF STATE TALLAHASSEE, FLORIDA
2. Principal	Office Address	3. Mailing Office Address Sq mu	FEINSTATEWENT <u>03-04</u>
Suite, Apt. #.	30X 576	Suite, Apt. #, etc.	
0% A 04-4-		City & State	4. Date Incorporated or Qualified To Do Business in Florida CPC , 1996
City & State	tin FL	Only a state	5. FEI Number 36-3989575 Applied For Not Applicable
Zip 3つくし	Country	Zip Country	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent			
	Name Cothy Fo	é(1	
	Street Address (P.O. Box Number is N	CISH CIC.	200036073042.
	Suite, Apt. #, Etc.		**************************************
	city Destin		State Zip Code FL 32,5 4/
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 Pagent Registered Agent Registered Registered Agent Registered Re			
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 Director	Street Address of E Officer and/or Dire	
P	Cathy Fell	315 Sailfish (Circle Destin/FL/32541
VP	Scott Jense	n 359 Evergree	en Pl. Detin/FC/32541
5/+	Greg Michau	Solic.	Dr. Ostin/FL/3254/
7)	Joe Nelson		nober and Destin/FC/32541
D	2011	10000 Freedal	coastpky Distin/a/32550
	Greg Niemie	1 0 6 64	1/ 700/ /7//
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 all fees			
this reinstatement application, the reason for dissolution has been eliminated, the corporate harms statistics the requirements to section 119.07(3)(i), F.S. The information indicated 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayling Prions #			

Destin Optimist Club, Inc. P O Box 876
Destin, FL 32540

March 17, 2004

To Whom It May Concern:

I am the current president of the Destin Optimist Club, Inc. (FEI number 36-3989575). I have recently learned that our corporation status has been suspended due to the non-filing of the 2003 Uniform Business Report. The club has never received notice to file the report or the notice of the corporation being dissolved by your office. We wish to be reinstated and this letter is a request for the Department of State to waive the reinstatement fee of \$175. I have enclosed a check in the amount of \$122.50 for this and last year's filing fee, and also a completed Corporation Reinstatement form downloaded from your website. Thank you for your attention to this matter.

· Sincerely,

Cathy Fell President

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