

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR **(97)**
REINSTATEMENT



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

APPROVED
AND
FILED

97 NOV -5 PM 3:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N96000002237**

1. Corporation Name

THE SERENITY CLUB OF NAPLES, INC.

Principal Place of Business

1725 CR 951, SUITE 107
NAPLES FL ~~33995~~

34116

Mailing Address

1725 CR 951, SUITE 107
NAPLES FL ~~33995~~

34116



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

4. Date Incorporated or Qualified
To Do Business in Florida

04/22/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0669435

Applied For

Not Applicable

City & State

City & State

Zip

34116

Country

Zip

34116

Country

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
PRES	JERRY D. EDDLEMAN	5625 18th AVENUE S.W.	NAPLES, FL 34116
V.P.	DRICK COLLINS	828 11th STREET SW	NAPLES, FL 34117
TREA	ANNE K. ATON	6007 HOLLOW DR. NAPLES	NAPLES, FL 34112
SECY	Cynthia D. Prathe	2570 48th St SW	NAPLES FL 34116

REINSTATEMENT **(97)**

U. Adams

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

EDDLEMAN, JERRY D
1725 CR 951, SUITE 107
NAPLES FL ~~33995~~

Name

11/5/97

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

900002340769--6

Suite, Apt. #, Etc.

-11/06/97--01107--008

City

*****236.25 ***236.25**

State

Zip Code

FL

34116

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

Jerry D. Edleman

REGISTERED AGENT MUST SIGN

Date

11/2/97

11. This corporation owes or has paid 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:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jerry D. Edleman
JERRY D. EDDLEMAN

Date

Daytime Phone #

11/2/97 (941) 353-2105

CR2040 (9/97)