

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 DEC 27 AM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000003468

1. Corporation Name:

GULF COAST SANCTUARY / SARASOTA BRADENTON CHILDREN'S
ZOO
7100 PALMER ROAD
3115 44TH ST.

2. Principal Office Address

7100 PALMER ROAD

Suite, Apt. #, etc.

3. Mailing Office Address

3115 44TH ST.

Suite, Apt. #, etc.

City & State

SARASOTA, FLORIDA

City & State

SARASOTA, FLORIDA

Zip

34240-4216

Country

SARASOTA

Zip

34234

Country

SARASOTA

REINSTATEMENT 03-04

800043618148

12/27/04--01015--002 **297.50

**4. Date Incorporated or Qualified
To Do Business in Florida 1996**

5. FEI Number
65-0659177

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

MS. KAY P. ROSS

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

3115 44TH ST.

12/27/04--01015--002 **297.50

Suite, Apt. #, Etc.

City

SARASOTA

State
FL

Zip Code

34234-4216

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 617.0503, F.S.

**Signature of
Registered Agent**

Kay P. Ross

Date 12/15/06

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
MS.	KAY P. ROSS	3115 44TH ST.	SARASOTA, FL 34234
MS.	LINDA REPASY	24 TUCKER AVENUE	SARASOTA, FL 34232
MR.	DERRIK V. ROSS	3115 44TH ST.	SARASOTA, FL 34234
DR.	RON HINES	170 DRAPER DRIVE	BROWNSVILLE, TX 78251
MS.	PAMELA ZOPE	5317 FRUITVILLE RD. #175	SARASOTA, FL 34232

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 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:

Kay P. Ross

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/15/04

Date Daytime Phone #

CR2E061 (01/04)