

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

98 NOV 24 AM 9:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N97000000896(7)

1. Corporation Name

DAYTONA BEACH DIVE CLUB, INC.

Principal Place of Business

125 N. Ridgewood Avenue
Daytona Beach, FL 32114

Mailing Address

125 N. Ridgewood Ave.
Daytona Beach, FL 32114

REINSTATEMENT

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02/13/97	
City & State		City & State		5. FEI Number	
Zip		Country		59-3454902	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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
D/P	Anthony Compton	213 Farmbrook Rd.	Port Orange, FL 32127
D/VP	Clark Pennell	970 Deer Springs Rd.	Port Orange, FL 32119
D/S	Vera Miller	65 Coquina Ridgeway	Ormond Beach, FL 32174
D/T	Fred Holmes	633 Devon Street	Port Orange, FL 32127

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Bartlett, Laurence H. Esq. 125 N. Ridgewood Avenue Daytona Beach, FL 32114		Name Street Address (P.O. Box Number is Not Accepted) Suite, Apt. #, Etc. City	
		State FL	
		Zip Code	

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 L. H. Bartlett Date 11-18-98

REGISTERED AGENT MUST SIGN

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: Fred Holmes Fred Holmes 11/10/98 904/756-4826

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #