

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 OCT 27 AM 9:36

DOCUMENT # N98000000489

1. Corporation Name

DEERFIELD BEACH DOLPHINS SWIM TEAM, INC.

Principal Place of Business

1456 S.W. 6TH STREET
DEERFIELD BEACH FL 33441

Mailing Address

1456 S.W. 6TH STREET
DEERFIELD BEACH FL 33441



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

01/26/1998

5. FEI Number

650810215

Applied For

Not Applicable

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	4. City / State / Zip
D	GLUNT, CYNTHIA	1456 S.W. 6TH STREET	DEERFIELD BEACH FL 33441
D	ROBINSON, HAROLD	333 S.E. 10TH CT.	DEERFIELD BEACH FL 33441
D	NOLAND, PEGGY	325 S.E. 3RD. TERRACE	DEERFIELD BEACH FL 33441
D	HAGSON, SUSAN Cindy Pechac	531 S.E. 4TH ST 808 SE 14 Drive	DEERFIELD BEACH FL 33441
D	DISMUKE, BRENDA Barbara Holly	1312 S.E. 14TH CT 311 SW 34th Ave	DEERFIELD BEACH FL 33441 33442
D	Jolie Cosmano	1337 SW 26th Ave	Deerfield Bch FL 33442

8. Name and Address of Current Registered Agent

GLUNT, CYNTHIA
1456 S.W. 6TH STREET
DEERFIELD BEACH FL 33441

9. Name and Address of New Registered Agent

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

Cynthia Glunt

REGISTERED AGENT MUST SIGN

Date 10/14/99

11. 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:

Cynthia Glunt
Cynthia Glunt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/14/99 954-771-5567
Date Daytime Phone #