## PLEASE-READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State	03 0CT 21 AM 10: 16
KENTO JAI EN	DIVISION OF CORPORATIONS	SEORETARY OF STATE TALLAHASSEE, FLORIDA
DOCUMENT # W9900000592		
Young Men's Christian Association		
1. Corporation Name Young Men's Christian Association YMCA of Key West		
		I REMISTATEMENT 03
2. Principal Office Address	3. Mailing Office Address	800023961768 10/21/0301029001
Suite, Apt. #, etc.	Suite, Apt. #, etc.	10/21/05-01025-001 **51.25 8.5*
		4. Date Incorporated or Qualified To Do Business in Florida 999
City & State	City & State	5. FEI Number Applied For
Zip Country	Zip Country	05-0885380 Not Applicable
33040 USA	33040 USA	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status
Name	7. Name and Address of Current Registe	red Agent
Peter Kysman		
Street Address (P.O. Box Number Is Not Acceptable)		
Suite, Apt. #, Etc.		
City Key West 2ip Code FL 33040		
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 Date 10-14-03		
Signature of Registered Agent Date 10-14-03  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 Eac Officer and/or Directo	h City/State/Zin
VP Elliot Baron	· 906 Southard	St. Key West . FL 33040
m Sally Lewis	· 401 South St.	Key West, FL 33040
Tes Michael Der	Roche 14 Spoonbill	Key West, FL 33040
Sec Melanie Wils	on 2907 Staples	Ave. Key West, FL 33040
m Gerri Jewell	1502 South S	St. Key West, FL 33040
m Vicki Glordo	n 1615 United	St. KRI WEST, FL 33040
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 filling 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.		
( I to Comment of the District		
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR TREES Date Daytime Phone #		

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## We build strong kids, strong families, strong communities.

October 16, 2003

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom it May Concern:

This is a request to waive the corporation reinstatement fee of \$175.00. Due to change of management, the required forms were not received to renew our corporation. We deeply apologize for the inconvenience. Enclosed is our reinstatement, with the correct information and a check for \$61.25.

Thank you for considering this request.

Sincerely

Jeanne Capaz

YMCX-of Key West

Federal Tax ID#: 65-0885380 State Registration #: SC-09906