

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N99000005673

1. Corporation Name

FT. PIERCE INTERNATIONAL SEAPLANE MUSEUM, INC.

Principal Place of Business

Mailing Address

% ELK BANKIER PALMER & CHRISTU
4800 N. FEDERAL HIGHWAY STE 200E
BOCA RATON FL 33431

% ELK BANKIER PALMER & CHRISTU
4800 N. FEDERAL HIGHWAY STE 200E
BOCA RATON FL 33431

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

2. New Principal Office Address, If Applicable

326 West Dundee Road
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

326 West Dundee Road
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

09/23/1999

5. FEI Number

65-0978438

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
Director	George Wight, Jr.	326 West Dundee Road	Barrington Hills, IL 60010
President	Alex Eugenides	c/o 326 West Dundee Road	Barrington Hills, IL 60010
Secretary	Clyde Erickson	c/o 326 West Dundee Road	Barrington Hills, IL 60010
Director			

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8. Name and Address of Current Registered Agent

CHRISTU, ERIC
% ELK BANKIER PALMER & CHRISTU
4800 N. FEDERAL HIGHWAY STE 200E
BOCA RATON FL 33431

9. Name and Address of New Registered Agent

Name
Eric C. Christu, Esq.
Street Address (P.O. Box Number is Not Acceptable)
4800 N. Federal Highway
Suite, Apt. #, Etc.
200E
City
Boca Raton
State
FL
Zip Code
33431

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 11-9-00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

George Wight Jr 10/28/2000 847 426-4983