

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

79122

CORPORATION
REINSTATEMENT



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

FILED

01 MAY -1 AM 9:26

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # N99000007683

1. Corporation Name

St. Mary's River Optimist Club of
Nassau County, Inc.

2. Principal Office Address

Rt 2, Box 1441

Suite, Apt. #, etc.

3. Mailing Office Address

PO Box 1706

Suite, Apt. #, etc.

City & State

Bryceville FL 32009

Zip

32009

Country

U.S.

City & State

Callahan, FL

Zip

32011

Country

U.S.

4. Date Incorporated or Qualified
To Do Business in Florida

Dec. 21, 1999

5. FEI Number

59-3649538

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Tom Williams

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

3547 Vontz Way

Suite, Apt. #, Etc.

City

Callahan

State

FL

Zip Code

32011

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

Tom Williams

Date 3-13-01

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

P

Jim Adams

D

Rt 2, Box 1441

Bryceville, FL 32009

V

Carla Higginbotham

D

2765 Old Baldwin Rd

Callahan, FL 32011

V

Barbara Geiger

D

4577 Ratliff Rd

Callahan FL 32011

S/T

Beth Reynolds

D

3530 Snyder Rd

Callahan FL 32011

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:

James Adams

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-13-01

Date

904.359-6028

723-5720

Daytime Phone #

CR2E081 (9/00)



Friend of Youth

*St. Mary's River Optimist Club
of Nassau County*

RG 2012

March 3, 2001

Michelle Milligan, Document Specialist
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

SUBJECT: Corporation reinstatement
(Ref. # N99000007683)

Dear Ms. Milligan:

The St. Mary's River Optimist Club of Nassau County Florida requests corporation reinstatement. Our notices to renew were mistakenly sent to the wrong address and we did not receive them. Enclosed is a check for \$122.50 (\$61.25 times 2 years) and a reinstatement application. Due to the error we request that any fees/ fines be waived.

Thank you for your consideration.

Sincerely,

Jim Adams
Jim Adams
President

P.O. Box 1706 Callahan, Florida 32011, 904-879-3940