

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

9/12/2

CORPORATION
REINSTATEMENT
2000-01 US

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		City & State Callahan, FL	
Zip 32009	Country U.S	Zip 32011	Country U.S.

4. Date Incorporated or Qualified To Do Business in Florida Dec. 21, 1999	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. FEI Number <i>tax</i> 59-3649538		
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	\$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**

800004194473 --- 5
-05/11/01 --01005--014
****122.50 ****122.50

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* Date **3-13-01** Daytime Phone # **904.359-6028**
723-5720

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (9/00)



Friend of Youth

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

RG 2/20/01

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
President