

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 JAN 22 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000078369

1. Corporation Name

REGULAR GUY CHARTERS, INC.

Principal Place of Business

1670 HWY. A1A
SATELLITE BEACH FL 32937

Mailing Address

1670 HWY. A1A
SATELLITE BEACH FL 32937

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

2. New Principal Office Address, If Applicable

292 Lanternback Island Dr.
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Satellite Beach, FL
Zip 32937 Country Brevard

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/14/2000

5. FEI Number 59-370538D

Applied For

Not Applicable

0716933153

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	VILARDEBO, KENNETH M	435 SHERWOOD AVENUE 292 Lanternback Island Dr.	SATELLITE BEACH FL 32937

900004912019--0
-02/12/02--01062--009
****900.00 ****900.00

8. Name and Address of Current Registered Agent

VILARDEBO, KENNETH M
1670 HWY. A1A
SATELLITE BEACH FL 32937

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

Kenneth M. Vilardebo

REGISTERED AGENT MUST SIGN

Date 12/21/01

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:

Kenneth M. Vilardebo

Kenneth M. Vilardebo

Date

Daytime Phone #

321-

12/21/01 779-2900

CR2E040 (8/01)