

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV 15 AM 9:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000063362

1. Corporation Name

BLUE BEAD FITNESS CLUBS, INC.

Principal Place of Business

2400 FIRST STREET
204
FORT MYERS FL 33901

Mailing Address

8771 WESLEYAN RIVE
#1508
FORT MYERS FL 33919

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

06/26/2001

5. FEI Number

65-1140364

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
PREVIOUS	BRAD DOWNING	2310 FIRST ST # 404	FT. MYERS, FL 33901

900009023219

11/15/02--01055--017 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DOWNING, WILLIAM B
8771 WESLEYAN DRIVE
#1508
FORT MYERS FL 33919

Name

DOWNING, William B

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

2400 FIRST STREET

Suite, Apt. #, Etc.

103

City

Fort MYERS

State
FL

Zip Code
33901

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

11/7/02

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/7/02

Daytime Phone #

CR2040 (8/02)

To: Florida Department Of State

From: Blue Bead Fitness Club

Date: 11/7/02

To whom it may concern,

I did not receive any document requesting the renewal of my corporation. Attached is the application for reinstatement with a business check for \$150.

Thank You for your understanding.



Brad Downing
President, Blue Bead Fitness Club