

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAR -2 PM 1:37

DOCUMENT # 902000041055

1. Corporation Name

The Funky Monkey Inc.

2. Principal Office Address

28 W Bayshore Dr.
Suite, Apt. #, etc.

3. Mailing Office Address

Same
Suite, Apt. #, etc.

City & State

St George Island, FL

City & State

Zip

Country

32328

Franklin

REINSTATEMENT 03-04

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

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

Sherry Wintker

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

509 W Sawyer St

Suite, Apt. #, Etc.

City

St George Island

State

FL

Zip Code

32328

700030477127

03/15/04--01057--018 **308.75

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

Sherry Wintker

REGISTERED AGENT MUST SIGN

Date

4/3/04

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
<u>Pres.</u>	<u>Sherry Wintker</u>	<u>509 W Sawyer St</u>	<u>St George Island FL 32328</u>
<u>V. Pres</u>	<u>Dolph Wintker</u>	<u>509 W Sawyer St</u>	<u>St George Island FL 32328</u>

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:

Sherry Wintker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/04

Date

850-927-9810

Daytime Phone #

CR2E081 (01/04)

I Sherry Winter mailed my Annual Report ^{packet}
+ check for \$150⁰⁰ to file my 2003 UBR.
I thought everything was in order until I
discovered that my Corporation had been
dissolved.

Sherry Winter