

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 SEP 25 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000078101

1. Corporation Name

MANATEE BAY RESTAURANT, INC.

2. Principal Office Address

58152 OVERSEAS HWY.

Suite, Apt. #, etc.

City & State

MARATHON, FL

Zip

33050

Country

USA

3. Mailing Office Address

11300 OVERSEAS HWY

Suite, Apt. #, etc.

City & State

MARATHON, FL

Zip

33050

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

7/18/2002

5. FEI Number

32-0025332

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

CHRISTOPHER B. WALDERA, P.A.

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

11300 OVERSEAS HIGHWAY

Suite, Apt. #, Etc.

City

MARATHON

State

FL

Zip Code

33050

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

Chaz B. Walder

REGISTERED AGENT MUST SIGN

Date

9/23/2003

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
DP	DUANE D. HANSEN	19 RIDERWOOD RD.	NORTH BARRINGTON, IL 60010
DVS	KATHY HANSEN	19 RIDERWOOD RD.	NORTH BARRINGTON, IL 60010

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)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DUANE D. HANSEN

Date

09/23/03 (305) 289-2223

Daytime Phone #

CR2E081 (10/02)

7/9/25

CHRISTOPHER B. WALDERA, P.A.

ATTORNEY AT LAW
11300 OVERSEAS HIGHWAY
MARATHON, FLORIDA 33050
TELEPHONE (305) 289-2223
FACSIMILE (305) 289-2249

September 23, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Secretary of State:

RE: Manatee Bay Restaurant, Inc. 32-0025332

I represent the above named corporation. Enclosed is the application for Corporation Reinstatement for Manatee Bay Restaurant, Inc. Also enclosed is the for profit filing fee of \$150.00. The corporation was administratively dissolved Friday, September 19, 2003. We are requesting a waiver of the reinstatement fee of \$600.00 because the corporation did not receive the Uniform Business Report form. The corporation is building a restaurant which has been under construction since August, 2002. As a result, mail for the corporation has been diverted to several different locations and the Uniform Business Report may have been lost as a result.

If you have any questions with respect to the foregoing, please call me.

Very truly yours,



Christopher B. Waldera