## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P02000121	093
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1. Corporation Name

## K+D FISHING CHARTERS,INC.

Principal Place of Business

Mailing Address

4090 DANCING CLOUD CT

4090 DANCING CLOUD CT #249

#249

FILFD

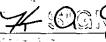
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SECRETARY OF STATE TALLAHASSEE. FLORIDA



DESTIN FL 32541 DESTIN FL 32541 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable 2. New Principal Office Address, If Applicable 34 Solor St Date Incorporated or Qualified To Do Business in Florida SOIDR 11/13/2002 Suite, Apt. #, etc Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State 16-1641820 Not Applicable \$8.75 Additional Fee required 32<u>569</u> Country CERTIFICATE OF STATUS DESIRED for a Certificate of Status 32569 **USA** 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each City / State / Zip Title(s) and/or Directors Officer and/or Director 4000 DANCING CLOUD CT #249 -Ρ AVARY, KETTH A DESTIN, FL-32541-4090 DANCING CLOUD CT. #249-**VP** GOODBREAD, DEBROAH DESTIN-FL-32541 TR avary, Keith A 4090 DANGING CLOUD CT. #249 DESTIN FL 32541urni Tali SEC GOODBREAD, DEBROAH-4090 DANGING CLOUD CT. #249 DESTIN-FL-32541... 600024056156 10/23/03--01083--013 \*\*150.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Keith HUDRY AVARY, KEITH A Street Address (P.O. Box Number is Not Acceptable) 34 SOVAR 4090 DANCING CLOUD CT #249 Suite, Apt. #, Etc. DESTIN FL 32541 City Zip Code Esther MARY 32569 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



REGISTERED AGENT MUST SIGN

Date 10-17-03

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.



10-17-03 850-581-2102

## FAX COVER SHEET

Captain Keith Avary 34 Solar St. Mary Esther, Fl. 32569 850-581-2102 850-581-2102

Send to:	From:
Attention:	Date:
Office Location:	Office Location:
Fax Number:	Phone Number:
☐ Urgent☐ Reply ASAP☐ Please comment☐ Please Review☐ For your Information☐ Total pages, including cover:	
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Keldh	D. AUARY () 16-17-03