

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 OCT 23 PM 12:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000131770

1. Corporation Name

LIONS PRESIDENTS' CLUB, INC.

2. Principal Office Address

3615 Quantum Blvd

Suite, Apt. #, etc.

City & State

Boynton Beach, FL

Zip

33426

Country

Palm Beach

3. Mailing Office Address

3615 Quantum Blvd.

Suite, Apt. #, etc.

City & State

Boynton Beach, FL

Zip

33426

Country

Palm Beach

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

12/12/02

5. FEI Number

65-1186335

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

CR2E081 (12/05)

05-06

7. Name and Address of Current Registered Agent

Name

Mark Perry

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

50 SE Fourth Ave

Suite, Apt. #, Etc.

City

Delray Beach

State

FL

Zip Code

33483

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

Robert L. Schurer

Date 10-20-06

REGISTERED AGENT MUST SIGN

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
PRES	ROBERT H. SCHURER	5740 RANLAKS RD	HWY FL 33463
VP	HOWARD SPENCER	4912 SLAKE DR	BOYNTON BEACH FL 33435
SEC.	ARTHUR MITCHELL	9470 S. MILITARY TR	" " " 33435
PIN	LEOPD WEEKS	4251 OLD BOYNTON RD	" " " 33436
PIN	BOB MCNAMARA	5749 PACE WALK DR	" " " 33436

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 contained in Chapter 119, 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:

ROBERT SCHURER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-20-06

Daytime Phone #

October 6, 2006

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

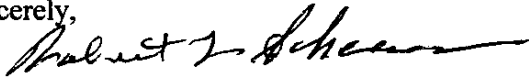
RE: LIONS PRESIDENTS CLUB, INC.

TO WHOM IT MAY CONCERN:

I am requesting that the reinstatement fee for the above Florida Corporation be waived. The Corporation did not receive the annual report notices in the year of dissolution.

Enclosed is the Corporation Reinstatement Document and a check for \$300.00. \$150.00 for the year 2005 and \$150.00 for the year 2006.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert Scheurer", written over a horizontal line.

Robert Scheurer, President
Lions Presidents Club, Inc.
2439 Quantum Blvd.
Boynton Beach, FL 33426