

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2006 NOV -9 AM 10:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000033886

1. Corporation Name

Golf Cars of America Sales And Leasing, Inc.

2. Principal Office Address

12885 SE US HWY 441

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Bellevue, FL

City & State

Zip
34420

Country
Marion

Zip

Country

CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida **02/15/2004**

5. FEI Number
86-1117903

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

Clyde L. Whitfield

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

12885 SE US HWY 441

Suite, Apt. #, Etc.

City

Bellevue

State
FL

Zip Code
34420

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

REGISTERED AGENT MUST SIGN

Date **11/04/2006**

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	Clyde L. Whitfield	12885 SE US HWY 441	Bellevue, FL 34420
Treas	Wanda G. Whitfield	12885 SE US HWY 441	Bellevue, FL 34420

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-04-2006

Date

352-347-9107

Daytime Phone #

Dear State of Florida:

November 04, 2006

FILED

Re: Golf Cars of America Sales & Leasing, Inc.

2006 NOV -9 AM 10: 14

I am requesting a waiver from the \$600.00 reinstatement fee.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Our mailing address for the corporation was to our former home in Northern Florida that is now a part-time residence. Because of our mail being held and sometimes forwarded we have experienced some difficulties with our mail delivery.

I can say that we did not receive the annual report and fee notices. We would have recognized and paid a notice of this importance.

I have included a check for \$300.00 to pay for the two missed annual fees. Our accountant has assured us that he will monitor future payments.

Thank you for your assistance in this matter.

Sincerely,



Clyde L. Whitfield
Director