

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1

APPLICATION FOR REINSTATEMENT

DOCUMENT # 96-98 AR
P96000000834

1. Corporation Name
Club 92 INC

Principal Place of Business
10101 E. Hwy 92
Tampa, FL 33610

Mailing Address
5417 MCLEOD Apt. B
Tampa, FL 33610

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
P	Christopher Stapleton	5417 MCLEOD Apt B Tampa, FL 33610	Tampa, FL 33610

500002487265--2
-04/14/98--01004--008
****\$15.00 ****\$15.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date 3/24/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information on intangible tax.)

12. 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISTOPHER STAPLETON

3/25/98
Date

(813) 626-7537
Daytime Phone #

CR2040 (1/98)

PAGE NO.	
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Club 92 Inc

5417 MC Reed Dr Apt B

Tempe IL 33610

PREPARED BY	(2)
DATE	

3-24-98

To Whom it may concern,

I started a business in Jan 1995 using an accountant and business representative. He handled all of the paperwork for the business.

My accountant was an elderly gentleman whose health has been fading him the last couple of years. I was not aware of an annual Corporate report and fees being due each year until recently when a friend asked me if I had paid my annual renewal fees for my Corporation. I then called the Division of Corporations to find that the reports were being sent to the wrong address. Please reinstate my Corporation and abate any penalties that may be due.

Thank You



Christopher Stapleton Pres.