

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

102

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 AUG -3 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A96000009710

1. Corporation Name

DANCE CITY, INC.

Principal Place of Business

Mailing Address

5240 BANK ST. #8
FT. MYERS, FL 33907

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

2. New Principal Office Address, If Applicable

N/A

3. New Mailing Office Address, If Applicable

N/A

4. Date Incorporated or Qualified To Do Business in Florida

1/30/96

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

050640128

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres.	BRIAN D. EDWARDS	1514-3 PARK MEADOWS DR FT. MYERS, FL 33907	FT MYERS, FL 33907
Sec.	"	"	"
Treas.	"	"	"
			300002606933--3 -08/04/98--01059--003 ***315.00 ***315.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

WILLIAM R. SMITH

Name

BRIAN D. EDWARDS

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

5240 BANK ST #8

Suite, Apt. #, Etc.

City

FT MYERS

State

FL

Zip Code

33907

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

Brian D. Edwards

REGISTERED AGENT MUST SIGN

Date

7/16/98

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 in 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. and the 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:

Brian D. Edwards, Pres

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7/16/98 941-275-3433

Daytime Phone #

7/16/98

2 of 2

To whom it may concern,

We never received a notification to re-instate our corporation for 1997.

Please, find a check for \$315.00 which represents the fees due after the penalties have been deducted.

Sincerely,
Brian D. Edwards, Pres.