

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

01 JAN 18 PM 4:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000032065**

1. Corporation Name

Tight Line Charters, Inc

600003575756--0

-01/26/01--01015--010

****900.00 ****900.00

2. Principal Office Address

3. Mailing Office Address

5145 Rosewood Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Vero Beach

FL

Zip

Country

USA

Zip

Country

32966

Indian River

32966

4. Date Incorporated or Qualified
To Do Business in Florida

4-12-96

5. FEI Number

65-0658414

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

William Patrick Rust

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

5145 Rosewood Lane

Suite, Apt. #, Etc.

City

Vero Beach

State

FL

Zip Code

32966

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

William Patrick Rust

Date **1-12-01**

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. | William Patrick Rust | 5145 Rosewood Lane | Vero Beach, FL 32966 |
| Sec. | " | " | " |
| Treas. | " | " | " |
| | | | |
| | | | |
| | | | |

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 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:

William Patrick Rust

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-01 (561) 532-4551

Date

Daytime Phone #

CR2ED01 (9/00)