

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2



APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -6 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000052691

1. Corporation Name

RISING TIDES, INC.

Principal Place of Business

Mailing Address

2415 COSTA VERDE BLVD
209
JACKSONVILLE BEACH FL 32250
US

2415 COSTA VERDE BLVD
209
JACKSONVILLE BEACH FL 32250
US



800024459818
11/06/03--01002--028 **150.00

03

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

4. Date Incorporated or Qualified To Do Business in Florida

06/20/1996

Suite, Apt. #, etc. 902

Suite, Apt. #, etc. 902

5. FEI Number

59-3387700

Applied For

Not Applicable

City & State JACKSONVILLE BEACH

City & State JACKSONVILLE BEACH

Zip 32250

Country USA

Zip 32250

Country USA

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	4 City / State / Zip
PC	WOTIZ, ARTHUR C	2415 COSTA VERDE BLVD, #209 1331 N 1st St, #902	JACKSONVILLE BEACH FL 32250

REINSTATEMENT

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

WOTIZ, ARTHUR C
2415 COSTA VERDE BLVD
209
JACKSONVILLE FL 32250

Name WOTIZ, ARTHUR C
Street Address (P.O. Box Number is Not Acceptable) 1331 N 1st St.
Suite, Apt. #, Etc. 902
City JACKSONVILLE BEACH State FL Zip Code 32250

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. or 617.0505, F.S.

Signature of Registered Agent

A.C. Wotiz

REGISTERED AGENT MUST SIGN

Date

10/31/03

11. 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:

A.C. Wotiz
A.C. Wotiz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/31/03

Daytime Phone #

CR2E040 (7/03)

2012



P. O. Box 50175 • Jacksonville Beach, Florida 32240

P. 904.398.7780 F. 904.241.6684

E-mail: wotiz@bellsouth.net

Dear Dept of State,

I did not receive
2 GBR reports/forms. The
location of Rising Tides changed,
and perhaps that is the
reason.

Sincerely,
AET wotiz