

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 DEC 24 AM 9:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000031055

1. Corporation Name

Gulf Harbour Yacht Club, Inc.

600004765416--9

-01/10/02--01076--005

****236.25 ****236.25

2. Principal Office Address

14490 Vista River Drive

Suite, Apt. #, etc.

City & State

Fort Myers, FL

Zip Country

33908 U.S.A

3. Mailing Office Address

14490 Vista River Drive

Suite, Apt. #, etc.

City & State

Fort Myers, FL

Zip Country

33908

U.S.A

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

4/04/1997

5. FEI Number

65-0749473

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

PHILIP N. KNISKERN

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

11211 COMPASS POINT DRIVE
FT. MYERS, FL 33908-4940

Suite, Apt. #, Etc.

City

State
FL

Zip Code

LS

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 12/20/01

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
Commodore	Gene Custer	11471 Wellfleet Drive	Ft. Myers, FL 33908
Vice Commodore	Dean Warner	11490 Compass Point Drive	Ft Myers, FL 33908
Rear Commodore	Dana Snyder	11137 Harbour Estates Circle	Ft. Myers, FL 33908
Director	Victor Pfeiffer	14580 Dory Lane	Ft. Myers FL 33908
Director	Harry Randall	12450 Coconut Creek Drive	Ft Myers, FL 33908
Director	Victor Fleagle	11130 Harbour Yacht Circle	Ft Myers, FL 33908

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/20/01

Date

941-590-9000

Daytime Phone #

CR2E081 (9/00)