

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000072422

1. Corporation Name

C&D MARINE CONSTRUCTION OF LEE COUNTY, INC.

Principal Place of Business

117 SE 44 ST
CAPE CORAL FL 33904

Mailing Address

117 SE 44 ST
CAPE CORAL FL 33904

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

2. New Principal Office Address, If Applicable

5201 WISTERIA CT
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

5201 WISTERIA CT
Suite, Apt. #, etc.

City & State

CAPE CORAL FL

City & State

CAPE CORAL FL

Zip

33904-5608

Country

Lee

Zip

33904-5608

Country

Lee

4. Date Incorporated or Qualified
To Do Business in Florida

08/20/1997

5. FEI Number

65-0850774

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)

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	VANTINE, MARK	117 SE 44 ST 5201 WISTERIA CT	CAPE CORAL FL 33904

8. Name and Address of Current Registered Agent

VANTINE, MARK
117 SE 44 ST
CAPE CORAL FL 33904

9. Name and Address of New Registered Agent

Name

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

5201 WISTERIA CT
Suite, Apt. #, Etc.

City

CAPE CORAL

State

FL

Zip Code

33904

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

✓ Mark Vantine

REGISTERED AGENT MUST SIGN

Date

✓ 11-9-99

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 118.07(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:

✓ Mark Vantine

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

✓ 9-9-99

Date

Daytime Phone #

CR2E040 (8/99)