PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## **APPLICATION FOR** REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## **DOCUMENT #** Corporation Name

FILED

99 DEC 10 AH 10: 13

SECHETARY OF STATE TALLAHASSEE, FLORIDA

December 8 , 1999 321-952-8617

Daytime Phone #

Date

PALM BAY GOLF CLUB, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

3375 Bayside Lakes Blvd. P.O. Box 100352

Palı	m Bay, Florida 329	07 Pa		Florida 32910	REINS	STATEME	VT	1999
	addresses are incorrect in any way, line the							
New Principal Office Address, If Applicable     3.		3. New Mai	New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida June 18, 1998			
Suite, Apt. #, etc. Suite,		Suite, Apt. #	#, etc.		5. FEI Number			
City & State City & State		e e			Applied For Not Applicable			
Zip	Country	Zip	Cou	ntry	6. CERTIFICA	TE OF STATUS DESIRED 🔀 S	8.75 Add for a Ce	ditional Fee requirertificate of Status
7. Names	and Street Addresses of Each Officer and	or Director (FI	orida nonprofit corpe	orations must list at lea	ast 3 directors)			<del></del>
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box N		r	City / State / Zip		
Р :	Milton D. Petride	s				10H, Singer	T = 1	33404
Exec. V-P	James Fraser		1855 Cat		, parce	McKee City,		08232
D	Oouglas Fraser		1855 Cates Road			McKee City,		08232
D	Bonnie Siok		1855 Cates Road			McKee City,	NJ	08232
D 	Don Siok		1855 Cates Road			McKee City,	NJ	08232
Asst S	Despin Petrides	spin Petrides 5380 N. Ocean Dr., Suite 10H					nd, :	FL 3404
	8. Name and Address of Current	Registered Ag	ent			Address of New Registered		
S Suite 10H  8. Name and Address of Current Registered Agent  Patrick F. Healy, Esq.  1499 South Harbor City Boulevard				Name		-01/20/00 -01/20/00	010	<u> 11025                                   </u>
Melbourne, Florida 32901			evard	Street Address (F	2.O. Box Number	r is Not Acceptable 758	<u>'</u> ა *∺	***758 <b>.</b> 75
	, I LOI Laa		Suite, Apt. #, Etc.					
				City		Sta		Dode
10. I, being	g appointed the registered agent of the abo	ve named corp	oration, am familiar	with and accept the ol	bligations of Sec			
Signature on Registered	Agent (AMW 7///	GISTERED AC	GENT MUST SIGN			Date Decembe	r 8	, 1999
	nis corporation owes the tangible Personal Proper	current y	/ear	Yes	□ No □	(See other s	ide for inf angible ta	
this reir	that I am an officer or director or the receinstatement application, the reason for dissoy the corporation have been paid and the r	யtion has beer	n eliminated, the cor duals listed on this f	porate name satisfies	the requirements	of section 607 0401 or 617	Ω401 F S	that all fees

AME OF SIGNING OFFICER OF .CTOR