

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

112

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 NOV -9 PM 12:08

DOCUMENT # P 98000068103

1. Corporation Name

Safari River Tours, Inc.

2. Principal Office Address

235 Plumosa Road

Suite, Apt. #, etc.

City & State

DeBary, FL

Zip

32713

Country

USA

3. Mailing Office Address

235 Plumosa Road

Suite, Apt. #, etc.

City & State

DeBary, FL

Zip

32713

Country

USA

REINSTATEMENT

2004

4. Date Incorporated or Qualified
To Do Business in Florida

08-04-1998

5. FEI Number

59-3518186

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$875 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

George S. Warthen

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

235 Plumosa Road

Suite, Apt. #, Etc.

City

DeBary

State

FL

Zip Code

32713

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

George S. Warthen

REGISTERED AGENT MUST SIGN

Date

11/4/04

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
Director	George S. Warthen	235 Plumosa Road	DeBary, FL 32713

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:

George S. Warthen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/4/04

Date

386-216-5399

Daytime Phone #

CR2E081 (10/02)

Joseph Alexander Scarlett, III
Attorney at Law

212

Certified Mediator:
County, Circuit, Family

208 West Houry Avenue
DeLand, Florida 32720
Telephone 386-734-8600
Facsimile 386-738-3322
josephascarlett3rd@yahoo.com

November 4, 2004

Florida Department of State
Division of Corporations
Corporate Records
Post Office Box 6327
Tallahassee, Florida 32314

Dear Secretary of State:

Enclosed please find Corporation Reinstatement form. The original Corporation Status Notice form had been sent, apparently, to the wrong address and returned to your file as reflected on your computer screen. We were informed to submit the enclosed Corporation Reinstatement form and the fee for same herein of \$150.00. Your consideration in the situation is greatly appreciated.

Further, enclosed, are the Restated Articles of Incorporation, again for Safari River Tours, Incorporation. Also, the fee to file same accompanies the Reinstated Articles of Incorporation in the amount of \$43.75.

Any questions or corrections, please do not hesitate to call.

Sincerely,



Sheila A. Scarlett
Assistant to Attorney

sas/jb

Enclosures