

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 NOV -1 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000093239

1. Corporation Name

CLUB INTERNATIONAL OF FORT LAUDERDALE, INC.

Principal Place of Business

1524 N.W. 13 AVENUE
FORT LAUDERDALE FL 33311

Mailing Address

1524 N.W. 13 AVENUE
FORT LAUDERDALE FL 33311

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

2. New Principal Office Address, If Applicable
1223 NW 6th Street
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable
1223 NW 6th Street
Suite, Apt. #, etc.

City & State
Ft. Lauderdale, FL
Zip 33311
Country Broward

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Ft. Lauderdale, FL
Zip 33311
Country Broward

4. Date Incorporated or Qualified
To Do Business in Florida

11/03/1998

5. FEI Number

☒ 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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	WEBB, LEVOYNE	1524 N.W. 13 AVENUE	FORT LAUDERDALE FL 33311
P-D	Terrence Ewell	1223 NW 6th Street	Ft. Lauderdale, FL 33311

900003039529-8
-11/09/99--01051--011
***750.00 ***750.00

8. Name and Address of Current Registered Agent

WEBB, LEVOYNE Terrence Ewell
1524 N.W. 13 AVENUE 1223 NW 6th Street
FORT LAUDERDALE FL 33311

9. Name and Address of New Registered Agent

Name Terrence Ewell
Street Address (P.O. Box Number is Not Acceptable)
1223 NW 6th Street
Suite, Apt. #, Etc.

City Ft. Lauderdale
State FL Zip Code 33311

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

Terrence Ewell
REGISTERED AGENT MUST SIGN

Date 10-29-99

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 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.

KE

SIGNATURE:

Terrence Ewell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-29-99 984-730-9970
Date Daytime Phone #