

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 NOV -8 PM 12:46

DOCUMENT # P98000102809

1. Corporation Name

PALM ISLAND MOTEL OF SANIBEL, INC.

Principal Place of Business

1351 RIO VISTA AVENUE
FT. MYERS FL 33901

Mailing Address

1351 RIO VISTA AVENUE
FT. MYERS FL 33901



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

2. New Principal Office Address, If Applicable

706 Donay Street

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

706 Donay Street

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

12/10/1998

5. FEI Number

65-0885015

Applied For

Not Applicable

City & State

Sanibel, FL

City & State

Sanibel, FL

Zip

33957

Country

USA

Zip

33957

Country

USA

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	ZWICK, JACK	1351 RIO VISTA AVENUE	FT. MYERS FL 33901

200003052232--B
-11/23/99--01004--002
****150.00 ****150.00

40 Palm View Motel
706 Donay Street
Sanibel, FL 33957

8. Name and Address of Current Registered Agent

SHEA, JOHN J JR.
630 S. ORANGE AVE., #300
SARASOTA FL 34236

9. Name and Address of New Registered Agent

Name Jack Zwick
Street Address (P.O. Box Number is Not Accepted)
1351 RIO VISTA AVE
Suite, Apt. #, Etc.
City FT Myers
State FL Zip Code 33901

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

Jack Zwick

REGISTERED AGENT MUST SIGN

Date 10-18-99

11. I certify that I am an officer or director of 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:

Jack Zwick
JACK ZWICK

President 10-18-99

Date

Daytime Phone #

AD

941.421-1600

Division of Corporations
Annual reports Filings
PO Box 1500
Tallahassee, FL 32302-1500

October 18, 1999

Dear Sirs:

I am writing this letter for Jack Zwick, as the manager of his property.

Mr. Zwick purchased this property in December of 1998. He then set up this Corporation. He used a Mr. John J. Shea Jr. as his Registered Agent, who is an attorney. A month after this was set up, Mr. Zwick found out he had cancer and had to under-go immediate treatment, thinking all the while Mr. Shea was taking care of this situation, since Mr. Zwick was paying him for his services.

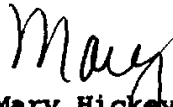
Meanwhile we receive the letter saying that the Corporation had been dissolved. Mr. Shea stated that it was just incorporated and it had been less than a year and that everything was all right.

Meanwhile we get a letter of dissolvent. Mr. Zwick is frantic, which it his situation is not good.

As you can see we have changed the agent and the address, and are pleading that you accept the payment of \$150.00 so that everything can get back to normal and that Mr. Zwick can be at ease. All future matters will be handled through this address and myself.

Thank you in advance for your consideration.

Sincerely,


Mary Hickey
Manager, Balm View Motel