

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

10F2

APPLICATION  
FOR



FLORIDA DEPARTMENT OF STATE  
2000 UBE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P99000014249

1. Corporation Name

YACHT DOCS, INC.

FILED  
00 OCT 19 AM 11:41  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Principal Place of Business

Mailing Address

6559 B CHASEWOOD DRIVE NORTH  
JUPITER FL 33458

6559 B CHASEWOOD DRIVE NORTH  
JUPITER FL 33458



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

2. New Principal Office Address, If Applicable  
2385C PEA Blvd.

3. New Mailing Office Address, If Applicable  
2385C PEA Blvd.

4. Date Incorporated or Qualified  
To Do Business in Florida

02/12/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State  
Palm Beach Gardens

City & State  
Palm Beach Gardens

65-0897709

Not Applicable

Zip  
33410

Country  
US

Zip  
33410

Country  
US

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
President	Charles L. Navis	2385C PEA Blvd.	Palm Beach Gardens, FL 33410

300003448053--0  
-11/01/00--01125--004  
\*\*\*\*150.00 \*\*\*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

NAVIS, CHARLES L  
6559 B CHASEWOOD DRIVE NORTH  
JUPITER FL 33458

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

*Charles L. Navis*  
REGISTERED AGENT MUST SIGN

Date 10-17-00

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:

*Charles L. Navis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-17-00 561-627-

2300

CR2E040 (800)

**ZOFZ**  
Yacht Docs, Inc.  
2385C PGA Blvd.  
Palm Beach Gardens, FL 33410

Yacht Docs, Inc.

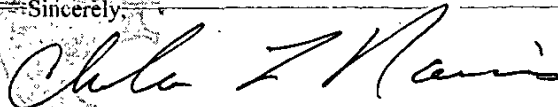
October 17, 2000

Department of State  
Divisions of Corporation  
PO Box 6327  
Tallahassee, FL 32314

To whom it may concern,

Please find enclosed a check and application for reinstatement of our corporation. We did not receive the Uniform Business application originally. The address you had on file was wrong, but the mail was being forwarded to the new address. We did receive the dissolve notice at the correct address, which leads me to believe that it was not sent originally. We try very hard to keep up with all of our corporation papers, and I am certain that I would of sent that in immediately to your office. Please accept the \$150 as payment in full for any penalties. Your understanding in this matter is greatly appreciated.

Sincerely,



Charles L. Navis  
President/Owner