

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

00 NOV -6 PM 5:32

DOCUMENT # **P99000030606**

1. Corporation Name

INDIGO SEAS CHARTER COMPANY, INC.

Principal Place of Business

Raynor
7569 SETH ERYNOR PLACE
SARASOTA FL 34240

Mailing Address

Raynor
7569 SETH ERYNOR PLACE
SARASOTA FL 34240



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

03/29/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-0913682

Not Applicable

Zip

Country

Zip

Country

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	Don Hayes	5403 Rindette Rd.	Tampa, FL 33647
V.P.	Scott Zime	1741 Elchaw P.	Sarasota, FL 34239
Sec.	GARY MOORE	7569 SETH ERYNOR PLACE	Sarasota, FL 34240

3000003488619--3
-12/06/00--01010--011
***150.00 ***150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MOORE, GARY D
7569 SETH ERYNOR PLACE
SARASOTA FL 34240

Name

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

SETH ERYNOR PLACE
Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

REGISTERED AGENT MUST SIGN

Date **11-1-00**

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.

AD

SIGNATURE:

GARY MOORE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-1-00
Date

941-379-3807
Daytime Phone #

CR2E040 (8/00)

October 31, 2000

Friends:

Apparently as you were using the wrong address, we did not receive your previous mailings. At the suggestion of the agent I spoke with, I am sending the normal fees. Should that not be sufficient, we will simply have to disband the corporation as it exists only to hold a charter boat that we never charter. That is, the corporation hasn't made enough to pay the fees!

Thanks for your consideration.

Gary Moore