

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1062

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 OCT 31 AM 8:01

DOCUMENT # P99000050124

1. Corporation Name

COYOTE PACK, INC.

Principal Place of Business

RIDGE ROAD HOUSE
43915 DIXIE HWY
PALM BAY FL 32905

Mailing Address

RIDGE ROAD HOUSE
43915 DIXIE HWY
PALM BAY FL 32905



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

05/28/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3578999

Applied For

Not Applicable

City & State

City & State

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	CLARK, BETTY	1422 RIDGE RD. N.E.	PALM BAY FL 32905
D	FEISER, DOUFLAS W	1733 ORANGE BLOSSOM TR. N.E.	PALM BAY FL 32905
D	OPSAHL, WILLIAM C	1422 RIDGE RD.	PALM BAY FL 32905
D	SCOTT, LISA P	4391 S. DIXIE HWY	PALM BAY 32905

8. Name and Address of Current Registered Agent

CLARK, BETTY
1422 RIDGE RD. N.E.
PALM BAY FT. FL 32905

9. Name and Address of New Registered Agent

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

10/23/02

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.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/23/02

CR2040 (8/02)

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RIDGE ROAD HOUSE

October 23, 2002

To whom it may concern:

As per my conversation with your office about the Dissolution of my corporation. I filed the 2002 UBR renewal the day after it was recieved in July (see enclosed letter) I regret that I did omitt a signature which when I received it back it was signed and sent back the same day. The paperwork was obviously not received by your office, I hope you will take this into consideration since the proper funds were paid. Should there be any further questions please feel free to contact me at 321.952.2546. I appreciate your time in resolving this matter.

Sincerely,



Betty Clark
President
Coyote Pack Inc

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