

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 702169

1. Corporation Name

GREATER HOLLYWOOD JAYCEES, INC.

97 DEC -1 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

ATTN: PRESIDENT

P. O. BOX 1551

HOLLYWOOD FL 33022-1551

Mailing Address

ATTN: PRESIDENT

P. O. BOX 1551

HOLLYWOOD FL 33022-1551



REINSTATEMENT

(97) A. Alan
12/11/97

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

03/17/1961

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-1356850

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
VP	DEVEUAX, RODNEY	2219 NE 13 ST	POMPAHO BEACH FL
PPD	BIEDERMAN, KEVIN Scott Jacobs	3040 N 73 TR. 2930 Hollywood Blvd.	HOLLYWOOD FL 33024
COB	GRONDVOLD, JOHN Kevin Biederman	2214 FILMORE ST 3040 N 73 Ter.	HOLLYWOOD FL Hollywood
D	POPELICK, MATT	3725 S. OCEAN DR. APT. 404	HOLLYWOOD FL 33019
T	ANZ, ROBERT JOPY	4165 SW 24TH STREET	FT. LAUDERDALE FL 33317
D	RIGSBY, TRACEY	2015 PIERCE ST. APT. 12	HOLLYWOOD FL 33020

8. Name and Address of Current Registered Agent

BIEDERMAN, KEVIN
2930 HOLLYWOOD BLVD.
HOLLYWOOD FL 33024

9. Name and Address of New Registered Agent

Name: SCOTT JACOBS
Street Address (P.O. Box Number is Not Acceptable): 2930 Hollywood Blvd
Suite, Apt. #, Etc.: 500002304855-8
City: Hollywood FL 33020
State: FL Zip Code: 33020

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: NOV 4, 1997

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/4/97 984-981-4378

CR2040 (8/97)