PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 DEC 17 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 707080

1. Corporation Name

BREVARD COUNTY AIR AND POWER BOAT ASSOCIATION IN C.

REINSTATEMENT 2003

Principal Place of Business	Mailing Address
6301 HWY. 192 PO BOX 192 W. MELBOURNE FL 32904	PRESIDENT. BCA & PBA P.O. BOX 192 MELBOURNE FL 32904 US

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: 03/31/1964

5. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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
P D	HARRISON, JOE	3255 HIELD RD.	MELBOURNE FL 32904
V	~~KUHMAN, JIM~~ WALT LORRAINE	~~1680 WILLARD DR.~~ 2600 TURTLEMOUND RD.	~~PALM BAY FL 32907~~ MELBOURNE, FL. 32934
T	HORSCHEL, JACK	300 CRESENT DR	MELBOURNE FL 32901
DC	CROWL, CLARENCE	380 DORSET DR	W. MELBOURNE FL 32904
S	CROWL, TINA L	161 MAYWOOD AVE NW	PALM BAY FL 32907
SAD	~~LARRAINE, WALT~~ MIKE BRYANT	~~2669 TRAMMEL AVE~~ 1298 GIDEON ST. N.W.	~~MELBOURNE FL 32935~~ PALM BAY, FL. 32908

8. Name and Address of Current Registered Agent

HARRISON, JOE
3255 HIELO RD
MELBOURNE FL 32904

9. Name and Address of New Registered Agent

Name: HARRISON, JOE
Street Address (P.O. Box Number is Not Acceptable): 3255 WIELD RD
700025534137
Suite, Apt. #, Etc.: 12/16/03--01073--001 **61.25
City: MELBOURNE | State: FL | Zip Code: 32904

CR2E040 (7/03)

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.

700025534137
12/16/03--01073--002 **175.00

Signature of Registered Agent: Joe Harrison Date: 12/8/03
REGISTERED AGENT MUST SIGN

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: Joe Harrison 12/8/03 321 724 5189
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #