

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 JUN -7 PM 12: 02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 756430

1. Corporation Name

KIWANIS CLUB OF THE AZALEA CITY, PALATKA, FLORIDA, INC.

Principal Place of Business

220 N. 11TH STREET
P.O. BOX 508
PALATKA FL 32178-7508

Mailing Address

201 N. SECOND STREET
P.O. BOX 508
PALATKA FL 32177-0508

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



REINSTATEMENT 01-02

4. Date Incorporated or Qualified
To Do Business in Florida

02/19/1981

5. FEI Number

59-6136754

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)

900005870929-1

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City & State & Zip
P	EDWARDS, ISH KELLER, CRIS	210 MADISON STREET 436 SOUTH HIGHWAY 17	PALATKA FL 32177 EAST PALATKA, FL 32131
VP	BOBE, BETTE DENNARD, CARL R.	6200 GRIFFIN AVE 128 DINKLA LANE	PALATKA FL 32177 -8885
D.	JACKSON, MICHAEL CORMENY, TERRY L.	2505 FAIRWAY DRIVE RR-7, BOX 302	PALATKA FL 32177 -9302
D	BIDDICK, MIKE HUGHES, KAREN A.	RR-1 BOX 1182 1907 MOSELEY AVE.	PALATKA FL 32177 -5924
D	JORDAN, ANDY SPALDING, MARC G.	115 THICKET FARM 1900 MOSELEY AVE.	PALATKA FL 32177 -5925
T	HUNTSBERGER, EDWARD D	2127 DIANA DRIVE	PALATKA FL 32177

8. Name and Address of Current Registered Agent

HUNTSBERGER, EDWARD D
2127 DIANA DRIVE
PALATKA FL 32178

9. Name and Address of New Registered Agent

Name

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

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

Edward D. Huntsberger
REGISTERED AGENT MUST SIGN

Date

6/4/02

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:

Edward D. Huntsberger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/4/02

CR2E040 (8/01)