

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 OCT 15 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # NO1000005038

1. Corporation Name

VOLUSIA FLAGLER FOSTER-ADOPTIVE PARENT
ASSOCIATION

2. Principal Office Address

P.O. BOX 1563

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. BOX 1563

Suite, Apt. #, etc.

City & State

DAYTONA BEACH, FL

City & State

DAYTONA BEACH, FL

Zip

32115

Country

US

Zip

32115

Country

US

REINSTATEMENT

03-04

4. Date Incorporated or Qualified
To Do Business in Florida

2001 JULY 16

5. FEI Number

59-3685083

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

JAMES H. McBRAYER JR.

600041905466

10/15/04--01075--009 **\$8.75

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

10 HICKORY LANE

600041905466

10/15/04--01075--009 **\$297.50

Suite, Apt. #, Etc.

City

FLAGLER BEACH, FL 32136

State

FL

Zip Code

32136

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

James H. McBrayer

REGISTERED AGENT MUST SIGN

Date 5 OCTOBER 2004

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	GEORGE A. GOOLDE	1801 MONASTERY RD	ORANGE CITY, FL 32763
V	BRENDA STEWART	53 WASSERMAN DR.	PALM COAST, FL 32164
S	LAURA WHITCOMB	489 HOPI COURT	PORT ORANGE, FL 32127
T	ALGERIA GRACE	207 INWOOD AVE.	NEW SMYRNA BEACH, FL 32168
D	CLARA BRISTOL	1034 ALICE DR.	DAYTONA BEACH, FL 32117
D	JAMES H. McBRAYER	10 HICKORY LANE	FLAGLER BEACH, FL 32136

10. 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:

George A. Goode, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

386-774-9448

5 OCT 2004

2082

DOCUMENT NUMBER: NO1000005038

CORPORATION REINSTATEMENT

VOLUSIA/FLAGLER FOSTER-ADOPTIVE PARENT ASSOCIATION

ITEM 9. CONTINUED

- D. JENNIFER DESMOND 621 IPSWICH LN. PORT ORANGE, FL 32127
 - D. DINA WENTWORTH 1435 OLD MISSION RD. NEW SMYRNA BEACH 32168
 - D. JOHN GRIFFIN 115 MURFIELD DRIVE. DAYTONA BEACH 32114
 - D. TAMARA WEAVER 1470 FELTON ST. DELTONA, FL 32725
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