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 NOV -7 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N14029

1. Corporation Name

GREATER NEW PORT RICHEY MAIN STREET, INC.

Principal Place of Business	Mailing Address
~~5919 MAIN ST.~~	~~P.O. BOX 622~~
~~NEW PORT RICHEY FL 34652~~	~~NEW PORT RICHEY FL 34656-0622~~
US	US

REINSTATEMENT 03

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
6231 Grand Blvd.	6231 Grand Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
New Port Richey, FL	New Port Richey, FL
Zip 34652 / Country	Zip 34652 / Country

4. Date Incorporated or Qualified To Do Business in Florida: 03/26/1986

5. FEI Number: 59-2684075 ☐ 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
DT	POTTER, MATTHEW	5940 MAIN ST	NEW PT RICHEY FL 34652
~~DP~~	~~HANCOCK, EDWIN~~	~~6642 U. S. HWY 19~~	~~NEW PORT RICHEY FL 34652~~
~~DS~~	~~STARKEY, BARBARA~~	~~5337 MAIN ST.~~	~~NEW PORT RICHEY FL 34652~~
D	FREY, BRUCE	6216 GRAND BLVD	NEW PORT RICHEY FL 34652
D P	THOMAS, TED	5417 MAIN ST.	NEW PORT RICHEY FL 34652
DVP	Deluca, Joe	6231 Grand Blvd.	New Port Richey, FL 34652

8. Name and Address of Current Registered Agent

POTTER, MATTHEW A CPA
5940 MAIN ST
NEW PORT RICHEY FL 34652

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc. 600024509916
11/07/03--01055--008 **61.25

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: Matthew A. Potter — Date: 9-30-03
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.

Matthew A. Potter - Treas.

SIGNATURE: Matthew A. Potter - Treas. 9-30-03 727-842-8066
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

GREATER NEW PORT RICHEY MAIN STREET, INC.
6231 GRAND BLVD.
NEW PORT RICHEY, FL 34652
727-842-8066

Florida Dept. Of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Reinstatement

To whom it may concern,

I am writing on behalf of, and as Treasurer, of the above named corporation. I am enclosing a completed application for reinstatement along with a check in the amount of $61.25. We respectfully request the reinstatement fee be waived in this matter because this corporation never received the two prior UBR notices.

Thank you for your time in this matter.

Sincerely,

Matthew A. Potter – Treas.