

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine ...
Secretary of State
DIVISION OF CORPORATIONS

96-99 AR

FILED

99 JUN 15 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N17831

1. Corporation Name
BREVARD CHARITIES, INC.
445 VESPER CT
MERRITT ISLAND, FL 32953

Principal Place of Business
234 WILLARD ST.
COCOA, FL 32922

Mailing Address
445 VESPER CT.
MERRITT ISLAND, FL
32953

REINSTATEMENT

96-99 AR

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

10/15/86

5. FEI Number

59-2768343

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)

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
P/D	VIRGIL A. GFELLER	445 VESPER CT.	MERRITT ISLAND, FL 32953
V/D	COLEEN ADAMS	368 BARRELLO LANE	COCOA BEACH, FL 32931
T/D	MILLIE WADIN	861 SUNNYBROOK LN	MELBOURNE, FL 32940
D	KAY GROOMS	140 ORANGE LN.	MERRITT ISLAND, FL 32952
D	CAROL DEGLER	425 CATAMARAN DR #65	MERRITT ISLAND, FL 32952
D	JOHN DEVIVO	1006 BEACON ST. N.W.	PALM BAY, FL 32907

8. Name and Address of Current Registered Agent

VIRGIL A. GFELLER
445 VESPER CT.
MERRITT ISLAND, FL 32953

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Numbers Not Acceptable)
000002914930--9
Suite, Apt. #, Etc
-06/24/99--01101--007
****420.00 ****420.00
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.

Signature of Registered Agent
Virgil A. Gfeller
REGISTERED AGENT MUST SIGN

Date
June 10, 1999

11. This corporation owes 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 taxes 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: Virgil A. Gfeller / VIRGIL A. GFELLER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/10/99 407-452-1736
Date Daytime Phone #

CR2E081 (12/98)