PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 JUN -5 AM 8:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

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

100005824441--8
-06/18/02--01084--016
****367.50 ****367.50

REINSTATEMENT 00-02

DOCUMENT # N27948

1. Corporation Name

Brevard County Bridal Association Inc.

2. Principal Office Address	**3.** Mailing Office Address
P.O. Box 2024	P.O. Box 2024
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Melbourne, Florida	City & State: Melbourne, Florida
Zip: 32902 Country: USA	Zip: 32902 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 8/15/1988

5. FEI Number: 361360795 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $5.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Michael J. Hillger

Street Address (P.O. Box Number is Not Acceptable): 2255 Royal Poinciana Blvd.

Suite, Apt. #, Etc.:

City: Melbourne State: FL Zip Code: 32935

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: Michael J Hillger Date: 5/28/02

REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

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
D/P	Michael Graham	96 Willard St. #203	Cocoa, FL 32922
D/V	Greg Kimple	148 June Dr.	Cocoa Beach, Fl 32923
D/T	Michael J. Hillger	2255 Royal Poinciana Bl.	Melbourne, FL 32935
D/S	Andrew Sommer	1110 Hollow Brook Lane	Malabar, FL 32950

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: Michael J Hillger Michael J. Hillger 5/28/02 321-253-4122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #