

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

08 JUN -3 AM 10:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N 32992

1. Corporation Name

SNELL ISLE FOUNDATION, INC.

**REINSTATEMENT** 06-08

2. Principal Office Address - No P.O. Box #

101 Appian Way Northeast

Suite, Apt. #, etc.

City & State

St. Petersburg, Florida

Zip

33704

Country

USA

3. Mailing Office Address

150 Second Street South

Suite, Apt. #, etc.

Suite 900

City & State

St. Petersburg, Florida

Zip

33701

Country

USA

CR2E081 (12/07)

4. Date Incorporated or Qualified  
To Do Business in Florida

06/26/1989

5. FEI Number

59-2963930

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

Diane Bailey

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

150 Second Street South

Suite, Apt. #, Etc.

Suite 900

City

St. Petersburg

State

FL

Zip Code

33701

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

*Diane Bailey*

REGISTERED AGENT MUST SIGN

Date

May 27, 2008

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
DP	Mary G. Evertz	101 Appian Way Northeast	St. Petersburg, FL 33704
VD	Harry M. Moorefield	1029 - 31st Terrace N. E.	St. Petersburg, FL 33704
TD	Jeannine Green	949 - 31st Terrace N. E.	St. Petersburg, FL 33704
DS	Diane Bailey	150 Second Street South Suite 900	St. Petersburg, FL 33701

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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 contained in Chapter 119, 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:

*Jannine Green*

Treasurer

5/26/08

Date

727-822-2673

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

726/3