PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 SEP 28 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N41355

1. Corporation Name
Tampa Bay Treasury Management Assoc., Inc.

Principal Place of Business
P.O. Box 21525
Tampa, FL 33622

Mailing Address
Same

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 97-98

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip | Country

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip | Country

4. Date Incorporated or Qualified To Do Business in Florida: 12/19/1990

5. FEI Number: 59-2417950 | 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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
DP	Janene Silver	One Progress Plaza	St. Petersburg, FL 33733
TDT	Stephen Winslow	8333 Bryan Dairy Rd	Largo, FL 33777
DS	Paula Castoro	702 N. Franklin St.	Tampa, FL 33602
DU	Carol Hackney	5350 Tech Data Dr.	Clearwater, FL 33760

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****297.50 ****297.50

8. Name and Address of Current Registered Agent
~~Hunter & Hunter, CPA's~~
~~1333 Snell Isle Blvd. NE #357~~
~~St. Petersburg, FL 33704~~

9. Name and Address of New Registered Agent
Name: David Durfee
Street Address (P.O. Box Number is Not Acceptable): 10302 Carroll Shores Place
Suite, Apt. #, Etc.
City: Tampa | State: FL | Zip Code: 33612

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: [signature] (REGISTERED AGENT MUST SIGN) Date: 9/23/98

11. This corporation owes or has paid 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 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: [signature] Stephen Winslow
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/23/98
Date

813-395-6440
Daytime Phone #