

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

B-1

**APPLICATION FOR REINSTATEMENT**



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

DOCUMENT # N43171

1. Corporation Name

CROSS ROADS VOLUNTEER FIRE DEPARTMENT, INC.

FILED

97 AUG -7 PM 3:26

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

Route 3, Box 385  
 Jasper, FL 32052

Route 3, Box 385  
 Jasper, FL 32052

**REINSTATEMENT 94-97**

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

4. Date Incorporated or Qualified To Do Business in Florida

04/29/1991

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0260877

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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	Livezey, Donald O.	Route 3, Box 396-C	Jasper, FL 32052
V	Spry, George	Route 1, Box 698	Jennings, FL 32053
T	Brown, Patricia S.	Route 1, Box 90-P	Jennings, FL 32053
S	Carlisle, Kathy	Route 3, Box 382 C-11	Jasper, FL 32052
	see attachment for Directors		

300002264863--5  
 -08/12/97--01075--001  
 \*\*\*\*420.00 \*\*\*\*420.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Gaches, John W.  
 Route 3, Box 188J  
 Jasper, FL 32052

Name  
**McCormick, John H.**  
 Street Address (P.O. Box Number is Not Acceptable)  
 215 N.E. 2nd Street  
 Suite, Apt. #, Etc.  
 City  
**Jasper**  
 State  
**FL**  
 Zip Code  
**32052**

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

*John H. McCormick*

John H. McCormick

REGISTERED AGENT MUST SIGN

Date August 6, 1997

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. 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: *Donald O. Livezey*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 Donald O. Livezey

August 6, 1997 (904) 938-4713

Date Daytime Phone #

CR2E040 (12/96)

ATTACHMENT: Application For Reinstatement  
Cross Roads Volunteer Fire Department, Inc.  
N43171

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7. Names and Street Addresses of each Director

D	Smith, Delmer	Route 1, Box 116	Jennings, FL 32053
D	Womack, William D.	Route 3, Box 390-42	Jasper, FL 32052
D	Bednarz, Emil F.	Route 3, Box 382C-24	Jasper, FL 32052
D	Carlisle, Robin	Route 3, Box 382C-11	Jasper, FL 32052
D	Derocco, Frederick	Route 3, Box 382C-11	Jasper, FL 32052