

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

03 OCT 17 AM 10:57

SECRETARY OF STATE
 TALLAHASSEE FLORIDA

DOCUMENT # **N43607**

1. Corporation Name

NETTLE RIDGE VOLUNTEER FIRE DEPT. INCORPORATED

Principal Place of Business

Mailing Address

20761 NE GUM ST
 BLOUNTSTOWN FL 32424
 US

20489 NE ADAMS ST
 BLOUNTSTOWN FL 32424
 US

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

32424

US

4. Date Incorporated or Qualified To Do Business in Florida

05/29/1991

5. FEI Number

59-3062266

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)

10/17/03-01004-001 **61.25

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	HOLLEY, JIMMY L	RT 2 BOX 810	BLOUNTSTOWN FL
TO P	HIRAS, RICK Hires	19119 ELIJAH MORRIS ST	BLOUNTSTOWN FL
D	BURKETT, GREG	RT. 2 BOX 718	BLOUNTSTOWN FL
S	TOMLINSON, MARK	19129 NE JOHN BRYANT RD	BLOUNTSTOWN FL 32424
AF	DIETZ, DAVID J	19056 NE ELIJAH MORRIS RD	BLOUNTSTOWN FL 32424
S T	BRACEWALL, JOE F. Janet Dietz	RT 2 BOX 860 19044 NE Elijah Morris Rd	BLOUNTSTOWN FL Blountstown FL 32424

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HALL, BEN
 20489 NE ADAMS ST
 BLOUNTSTOWN FL 32424

Name
Ricky Hires
 Street Address (P.O. Box Number is Not Acceptable)
19119 NE Elijah Morris Rd.
 Suite, Apt. #, Etc.
Blountstown
 City

State
FL
 Zip Code
32424

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. or 617.0505, F.S.

Signature of Registered Agent

[Signature]
 REGISTERED AGENT MUST SIGN

Date **10/10/05**

11. 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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **10-10-03**

Date

Daytime Phone # **850-674-4368**

Daytime Phone #

CR2ED40 (7/03)



REINSTATEMENT 03

Nettle Ridge VFD
20761 NE Gum Street
Blountstown, FL 32424

October 11, 2003

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir:

Enclosed is our check for the amount of \$61.25 and application for reinstatement. We did not receive the two prior UBR notices. Apparently they were mailed to the wrong address, since the address is wrong on the reinstatement form.

If we need to send you more information, please contact us at 19119 NE Elijah Morris Road, Blountstown, FL 32424 or 850-674-7054.

Rick Hires,
Fire Chief

