

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION

FLORIDA DEPARTMENT OF STATE

Sandra P. Morriam  
Secretary of State

DIVISION OF CORPORATIONS



96 AIR

FILED

12

97 JAN 24 PM 2:37

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # **N44194**

1. Corporation Name

**PEGGY GRIFFIN SCHOLARSHIP FUND, INC.**

Principal Place of Business

Mailing Address

C/O C. RIDGE  
UNITE #1  
RIVIERA BEACH FL 33404  
US

1960 WEST 9TH STREET  
UNIT 1-C/O C. RIDGE  
RIVIERA BEACH FL 33404  
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

4. Date Incorporated or Qualified To Do Business in Florida

07/01/1991

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0274484

Applied For

Not Applicable

City & State

City & State

Zip

County

Zip

Country

33408

PALM BEACH

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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
<del>D</del> D	<del>RIDGE, CLAIRE</del> Linda Smitte	1960 W. 9TH ST. 17976 VIA RID	RIVIERA BEACH FL JUPITER, FL 33458
<del>D</del> D	<del>ARNOLD, ELAIN</del> Maxine Taylor	796 NW 15TH AVE. 725 Hummingbird Way #111	BOCA RATON FL North Palm Bch, FL 33408
D	SERRAES, ANDREA	1300 53RD ST.	WEST PALM BEACH FL
<del>D</del> D	<del>AIKEN, IRMA</del> GRIFFIN, MARGARET	525 KIRK ROAD #106D 14622 SW DRYOT DR.	WEST PALM BEACH FL INDIANTOWN FL

100002070391-3  
-01/28/97--01097--002  
\*\*\*\*\*61.25 \*\*\*\*\*61.25

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RIDGE, CLAIRE  
1960 W. 9TH STREET  
RIVIERA BEACH FL 33404

Name: MAXINE TAYLOR  
Street Address (P.O. Box Number is Not Acceptable): 725 Hummingbird Way  
Suite, Apt. #, Etc.: #111  
City: North Palm Bch State: FL Zip Code: 33408

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S.

Signature of Registered Agent

*Maxine Taylor*

REGISTERED AGENT MUST SIGN

Date 1-20-97

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:

*Maxine Taylor*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-97 (561) 842-5238

Date

Daytime Phone #

CR2E040 (7/96)

1 / **THE BALANCE SHEET, INC.**  
**A BOOKKEEPING AND PERSONAL TAX SERVICE**

2/2

Jean Tower,

Sorry for the delay - but  
I had a baby & then  
there were complications.  
Finally back to work &  
all is well. Thank you  
for your help.

Marlene