

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 MAY 13 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000001899

1. Corporation Name

AFFORDABLE HOUSING ASSOCIATION OF FLORIDA, INC.

Principal Place of Business

300 THIRD STREET N.W.
WINTER HAVEN FL 33881

Mailing Address

300 THIRD STREET N.W.
WINTER HAVEN FL 33881

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

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

04/21/1995

5. FEI Number

59-3316635

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)

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
PD	FAZZINI, JOHN	101 E STUART AVE	LAKE WALES FL 33850
D	DAVID COUCH	2905 TREVI Circle	Kissimmee, FL 34746
VD	REEVES, RON	341 VEGANS STREET	LABELLE FL 33835
SD	Bobby GREEN	124 Mc Nichols AVE	Auburndale, FL
GP P/D	YOUNG, NEAL E	300 THIRD STREET N.W.	WINTER HAVEN FL 33881
VD	BOB Bedford	11680 OAK AVE.	Seminole, FL 33772
D	JAMES C. Spivey	522 Hwy 92 W	Auburndale, FL 33823

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8. Name and Address of Current Registered Agent

YOUNG, NEAL E
300 THIRD STREET N.W.
WINTER HAVEN FL 33881

9. Name and Address of New Registered Agent

Name

Street Address (Post Office Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

REGISTERED AGENT MUST SIGN

Date 5/5/98

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP25040 (8/97)