

## **CORPORATION**



## FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N98000 003490

1. Corporation Name

RICHMOND HEIGHTS MIDDLE SCHOOL SCIENCE/200 MAGNET BOOSTER CLUB, INC.

2. Principal Office Address 15015 SW 103 <sup>rd</sup> AVE.	3. Mailing Office Address 17621 SW 84 <sup>th</sup> CT.		
Suite, Apt: #, etc.	Suite, Apt. #, etc.		
City & State MIAMI, FL	City & State MIAMI, FL		
33176 Country	33157 Country US		

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TALLAHASSEE. FLIRTOA

4. Date Incorporated or Qualified To Do Business in Florida	898	<u> </u>	
5. FEI Number			Applied For
<u>5935857</u> 81		=	Not Applicable
6. CERTIFICATE OF STATUS DESIRED	\$8.75 Add	ditic ertif	onal Fee require

-	, 4	00101		for a Certificate
1		7. Name an	d Address of Current Re	gistered Agent
	Name  DNNA MC GINNIS  Street Address (P.O. Box Number is Not Acceptable)  17621 SW 84+h CT.			200009439182 1271070201074003 **236.2
	Suite, Apt. #, Etc.			State Zip Code FL 33157
,		and the second s	THE PERSON NAMED IN CO.	

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent	Dona
Registered Agent	100101

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	tors Street Address of Each Officer and/or Director		City / State / Zip	
lí	DONNA MCGINNIS	17621 SW 84th CT.	MIAMI	FL 33157	
TREAS.	ARCENE MARTIN (D)	15358 SW 140+65T.	MIAMI.	FL 33196	
SEC'Y.	ESTHER SARDINA (D)	14304 SW 145+ PL.	MIAMI	FL 33186	
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10. 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 filling 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

Date

Pach

17621 SW 84<sup>th</sup> Ct Miami, FL 33157 November 30, 2002

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

Dear Sirs:

I am writing to request your consideration of a waiver of the \$175 reinstatement fee for the Richmond Heights Middle School Science/Zoo Magnet Booster Club, Inc. of Miami, FL which is recorded under Document #N98000003990. I have been the registered agent for the organization for a number of years as my children have progressed through the middle school.

In May, 2001, my husband and I bought a house in the area and moved from the rental address on 14013 SW 90<sup>th</sup> Ave., which was listed in your records. Proper forwarding orders were in place in order to ensure that the move and related transitional mail went smoothly. The annual report form was never received.

I would appreciate your thoughtful consideration of a fee waiver for our non-profit corporation which supports the educational programming of middle school students in Miami-Dade County.

Sincerely,

Donna L. McGinnis

Sonnad. M. Gennies

President