

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JUN -4 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000091398

1. Corporation Name

Greater Pensacola Bay Area Chapter
of the Women's Council of REALTORS, Inc.

200020542682
06/05/03--01049--015 **297.50

REINSTATEMENT 02-03

2. Principal Office Address

P.O. Box 10113

3. Mailing Office Address

P.O. Box 10113

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pensacola, FL

City & State

Pensacola, FL

Zip

32524

Country

EScambia

Zip

32524

Country

EScambia

4. Date Incorporated or Qualified
To Do Business in Florida

10/21/1997

5. FEI Number

59-3193780

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Pamela L. Smith

Street Address (P.O. Box Number is Not Acceptable)

9011 N Davis Hwy

Suite, Apt. #, Etc.

City

Pensacola

State

FL

Zip Code

32526

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

Pamela L. Smith

Date 5-27-03

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	Street Address of Each Officer and/or Director	City / State / Zip
P	Nan Harper	649 Pensacola Beach Blvd.	Pensacola Beach, FL 32561
PE	Barbara O. Blades	4346 Gusty Terrace	Pensacola, FL 32503
S	Camille Ripley	220 W. Garden St., Suite 302	Pensacola, FL 32504
T	Tracy Kuchera	940 Creighton Rd.	Pensacola, FL 32504
VOM	Tracy Ratzin	970 Paradise Beach Cir.	Pensacola, FL 32506

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 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:

Nanette Harper
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

27 May 2003

Date

850-932-9322

Daytime Phone #

CR2E081 (10/02)