

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710669

1. Corporation Name

Sigma Nu Holding Corp., Inc.

Principal Place of Business

Mailing Address

Delta Mu Chapter Home

250 E. Stetson Ave
Deland, FL 32720
C/O Stetson University

FILED

98 APR 23 AM 9:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

2. New Principal Office Address, If Applicable

Delta Mu Chapter
Suite, Apt. #, etc.
250 E. Stetson Ave
City & State
Deland, FL
Zip
32720
Country
USA

3. New Mailing Office Address, If Applicable

421 N. Woodland Blvd
Suite, Apt. #, etc.
Box 8242
City & State
Deland, FL
Zip
32720
Country
USA

4. Date Incorporated or Qualified To Do Business in Florida

4/5/66

5. FEI Number

54-0628798

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
President CoFB	Kurt Swartzlander	622 Pleasant Run Dr. Deland, FL 32724	
Director	Brian Hill	795 N. Spring Garden Ave	Deland, FL 32720
Director	Burleigh Hale	237 W. Plymouth	Deland, FL 32720
Director	Vincent Fries	10623 3rd St North Apt B	St. Petersburg FL 33716

REINSTATEMENT

8. Name and Address of Current Registered Agent

Sorensen, W. Christian
12 Yorkfield Square
117 N. Garfield
Deland, FL 32720

9. Name and Address of New Registered Agent

Name
Kurt Swartzlander
Street Address (P.O. Box Number is Not Acceptable)
622 Pleasant Run Dr.
Suite, Apt. #, Etc.
City
Deland
State
FL
Zip Code
32724

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

Kurt Swartzlander
REGISTERED AGENT MUST SIGN

Date 4/16/98

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: VINCENT J. FRIES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/98
Date

(904) 740-9905
Daytime Phone #