

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 # 712667**

1. Corporation Name

**THE GIRL'S RACING ASSOCIATION, INC.**

Principal Place of Business

4500 ULMERTON RD  
CLEARWATER FL 34622  
US

Mailing Address

P.O. BOX 816  
PINELLAS PARK FL 33780

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

**33780**

Country



4. Date Incorporated or Qualified To Do Business in Florida

**04/28/1967**

5. FEI Number

**59-6209973**

☒ 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
DP	PHILLIPS, SHARI	1238 58TH AVENUE NORTH 830 118TH Ter N #1	ST. PETERSBURG FL 33703 St. Petersburg, FL 33716
D	HILL, NANCY Mowery, Sherry	12503 PALOMINO CT 12050 44th St N	TAMPA FL Clearwater FL 33762
DT	OLONE, DEBBIE Fewler, Pamela	1839 OAKDALE LANE S. 1439 30th Av N	CLEARWATER FL 34624 St Petersburg FL 33704

600002789516--2  
-02/26/99--0117--016  
\*\*\*\*245.00 \*\*\*\*245.00  
600002789516--2  
-02/26/99--0117--017  
\*\*\*\*52.50 \*\*\*\*52.50

8. Name and Address of Current Registered Agent

PHILLIPS, SHARI  
1238 58TH AVENUE NORTH  
ST. PETERSBURG FL 33703

9. Name and Address of New Registered Agent

Name **Shari Phillips (corrected address)**  
Street Address (P.O. Box Number is Not Acceptable)  
**830 118th Ter N #1**  
Suite, Apt. #, Etc  
**#1**  
City  
**St Petersburg**  
State  
**FL**  
Zip Code  
**33716**

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 **Shari L. Phillips**  
REGISTERED AGENT MUST SIGN

Date **1/15/99**

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:

**Shari L. Phillips**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/15/99**

**(727) 568-0003**  
Daytime Phone #

CR2E040 (9/98)