

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

05 JUL 26 PM 2:15

DOCUMENT # 712-679

1. Corporation Name

GEORGE SIDNEY MILES SCHOLARSHIP FUND, INC.

2. Principal Office Address

585 N.W. 15th Court

Suite, Apt. #, etc.

City & State

Boca Raton, Florida

Zip

33486

Country

USA

3. Mailing Office Address

585 N.W. 15th Court

Suite, Apt. #, etc.

City & State

Boca Raton, Florida

Zip

33486

Country

USA

REINSTATEMENT 76-05

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

Applied For

☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Samuel B. McDonald

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

585 N.W. 15th Court

Suite, Apt. #, Etc.

City

Boca Raton

State

FL

Zip Code

33486

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**

Samuel B. McDonald

REGISTERED AGENT MUST SIGN

Date

8/2/05

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
Dir. Pres.	Samuel B. McDonald	585 N.W. 15th Court	Boca Raton, FL 33486
Dir. Sec.	Addie Hudson	1204 Hagen Ranch Road	Boynton Bch, FL 33437
Dir.	Hattie R. Pompey	1122 N.W. 2nd Street	Delray Bch, FL 33447
Dir.	Maxine Bright Davis	501 S. Mangonia Circle	West Palm Bch, FL 33401
Dir. Treas.	Betty Dawson	4128 Waberly Circle	West Palm Bch, FL 33407
Dir.	Willie L. Brown	815 21st Street	West Palm Bch, FL 33407

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:

Samuel B. McDonald SAMUEL B. McDONALD

Date

8/2/05 (561) 391-9485

Daytime Phone #

CR2E081 (01/05)