PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION • ~ EQR REINSTÄTEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

718067

FILED

03 OCT 27 PH 3:21

SECRETARY OF STATE TALLAHASSEE, FLORIDA

WESTGATE ELEMENTARY SCHOOL PARENTS AND TEACHE	RS
ASSOCIATION OF ST. PETERSBURG, FLORIDAINC.	

Principal Place of Business

1. Corporation Name

Mailing Address

A CRACICE CORRECTION OF MICHIGARY CORRECTIONS OF A CORRECTION OF A CORRECTION

3560 58TH ST. N. 3560 58TH ST PETERSBURG FL 33710 ST PETERSB			t. n. URG FL 33711	0						
If above addresses are incorrect in any way, line through incorrect information and enter correction below.						REINSTATEMENT 0 >				
New Principal Office Address, If Applicable				ing Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida O2/13/1970				
Suite, Apt. #, etc. Suite, Apt.			Suite, Apt. #,	ŧ, etc.		5. FEI Number Ap		Applied	For	
City & State City &			City & State	-		6.	Тиот Арриса			
Zip		Country	Zip		Country	1	OF STATUS DESIRED	\$8.75 Additional Fee for a Certificate of S		
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)										
Title(s)				Street Address of Each Officer and/or Director			City 4	/ State / Zip		
PB D	SEILER, TAMMY 5511 65TH AVE			H AVE N	PINELLAS PARK FL 33781					
SD	FAWCETT, THERESA 2263-60TH WAY N				H WAY N	SAINT PETERSBURG FL 33710				
PD	KELLY, DEBORAH A			9812 5154 AV N			ST. PETE FL-99794 33708			
SB	TAYLOR, STACY 2 de Let 8727 55TH TER				H-TERR N	N SAINT PETERSBURG FL 33709				
WP.					O 40th Ave N		St Pete 33709			
T	T Carmen Robinson Cooper 4847 Lake Charles Dr. N. Kenneth Gite 12 33709									
8. Name and Address of Current Registered Agent						Name and Address of New Registered Agent				
					Name					
WESTG	ate eleme	ENTARY SCHOOL			Street Address (Street Address (P.O. Box Number is Not Acceptable)				
3560 58TH.STREET_NORTH				.						
ST. PETERSBURG FL 33710					Suite, Apt. #, Etc.					
				City 10/27/0301080005ate 20-306-25						
10. I, being	appointed the	e registered agent of the abo	ve named corpo	oration, am fa	amiliar with and accept the o	bligations of Secti	on 607.0505, F.S. or 617.	0505, F.S.		
Signature of Registered Agent Date 10-13-03 REGISTERED AGENT MUST SIGN										
this reins	statement app	officer or director or the receiplication, the reason for disso	olution has been	eliminated, t	he corporate name satisfies	the requirements	of section 607.0401 or 61	7.0401, F.S., that all fe	es [

on this application is true and accurate, and my signature shall have the same legal effect as it made under oath.