

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

00 FEB 10 PM 1:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 720723

1. Corporation Name

WORLD DOLPHIN FOUNDATION, INC.

Principal Place of Business

Mailing Address

C/O ELISABETH TRUBY  
7050 SUNSET DRIVE  
SOUTH MIAMI FL 33143  
US

7500 SW 63RD AVE  
MIAMI FL 33143  
US

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

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

04/15/1971

SP

5. FEI Number

23-7206892

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<br>Title(s) | 2<br>Name of Officers<br>and/or Directors | 3<br>Street Address of Each<br>Officer and/or Director | 4<br>City / State / Zip |
|---------------|---|--|-------------------------|
| D             | DOUGLAS, MARJORY S.(LLD)                  | 3744 STEWART AVENUE                                    | COCONUT GROVE FL        |
| VTD           | LEFEVRE, NORMAN F. (CPA)                  | 6820 SW 126 TERRACE                                    | MIAMI FL                |
| D             | CARY, DANIEL M. (MS)                      | 3620 WOOD CREEK TRAIL                                  | PALM CITY FL            |
| VD            | BEDNARCZYK, L. (PHD)                      | 1582 NE 8TH STREET-102                                 | HOMESTEAD FL            |
| SD            | TRUBY, ELISABETH.(EMT)                    | 7050 SUNSET DRIVE                                      | SOUTH MIAMI FL          |
|               |   |  |                         |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

TRUBY, FREDERICK S.  
7500 SW 63RD AVE  
MIAMI FL 33143

Name

02/16/00--01006--026

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

\*\*\*\*297.50 \*\*\*\*297.50

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

SIGNATURE REQUIRED

Date

Jan. 24, 2000

REGISTERED AGENT MUST SIGN

11. 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:

Elisabeth Truby  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/00

Date

205 248 2748

Daytime Phone #

CR2E040 (8-99)