

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS

APPROVED
AND
FILED

**APPLICATION
FOR REINSTATEMENT**



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

97 NOV -7 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 127753

1. Corporation Name
BLOOMINGDALE VOLUNTEER FIRE DEPARTMENT, INC.

Principal Place of Business Mailing Address
**4705 E. Bloomingdale Road
Valrico, FL 33594**

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip Country

3. New Mailing Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip Country

4. Date Incorporated or Qualified To Do Business in Florida
Oct. 15, 1973

5. FEI Number **59-1699641** 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
Pres. D	Charles F. Brown	5401 Rolling Fairway Dr.	Valrico, FL 33594
VP/ Treas. /D	Francis J. Michael III	1816 Alcorn Road	Valrico, FL 33594
Sec. D	Tony Halligan	806 Chadsworth Ave.	Seffner, FL 33584
D	James A. Currie	1309 Ivywood Drive	Brandon, FL 33510

REINSTATEMENT (99)

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name **Glen R. Lansky, Esq.
Griffin & Associates, P.A.** 11/7/97
Street Address (P.O. Box Number is Not Acceptable)
915 Oakfield Drive
Suite, Apt. #, Etc.
Suite F
City **Brandon** State **FL** Zip Code **33511**

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 *Glen R. Lansky*
REGISTERED AGENT MUST SIGN

Date **11/5/97**

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No

500002345025-2
11/12/97
***358.75 ***358.75

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: *Charles F. Brown*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **11/4/97** Daytime Phone

CR2C-040 (12/95)