

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 # 743463

1. Corporation Name

Florida Direct Marketing Association Incorporated

Principal Place of Business

Mailing Address

**c/o Betty Kaufman
8851 NW 10th Place
Plantation, FL 33322**

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

6/30/78

5. FEI Number

59-2489368

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
President	Robert Dunhill	1951 NW 19th Street	Boca Raton, FL 33431
Director	Betty Kaufman D	8851 NW 10th Place	Plantation, FL 33322
Chairman	Margaret Rolf	3160 Sunset Drive, N	St. Petersburg, FL 33710
Treasurer	Ron Butler D	2797 67th Street, N	St. Petersburg, FL 333710
Secretary	Dale Filhaber D	22594 Lemon Tree Lane	Boca Raton, FL 33497

8. Name and Address of Current Registered Agent

**Robert Dunhill
1951 NW 19th Street
Boca Raton, FL 33431**

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

500002778475--5

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FL

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

Robert Dunhill

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Dunhill

Date

1/15/99

Daytime Phone #

CPRE040 (1-98)