

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 # **743936**

1. Corporation Name

**ST. PATRICK'S DAY PARADE COMMITTEE, INC.**

Principal Place of Business

401 NE 107TH ST  
MIAMI FL 33161  
US

Mailing Address

P.O. BOX 531303  
MIAMI SHORES FL 33153  
US

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.  
**11098 Biscayne Blvd #205**  
City & State  
**Miami FL**  
Zip  
**33161** Country  
**USA**

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.  
**P.O. Box 144844**  
City & State  
**Coral Gables**  
Zip  
**33134** Country  
**USA**

4. Date Incorporated or Qualified To Do Business in Florida

**08/16/1978**

5. FEI Number

**59-1862399**

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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DS	CAMERON, BILLY	1100 S.W. 35TH TERRACE	MIAMI FL 33179
VD	SHELOW, DANNY	555 N.E. 75TH ST.	MIAMI FL 33138
VD	MEYER, ROBERT	207 ALHAMRA CIRCLE #1102	CORAL GABLES FL 33143
P	JUNES, GERARD O'BRIEN, WILLIAM	<del>205 S.W. 140 AVENUE</del> 14304 SW 142nd Ave	MIAMI FL 33186
D	VALERIANI, NICHOLAS P	3515 EAST GLONCUE ST.	MIAMI FL 33127
DT	<del>KANE, JOHN</del> DOHERTY, JOHN	<del>10441 S.W. 10TH ST.</del> 9810 SW 115th Ave	MIAMI FL 33176

8. Name and Address of Current Registered Agent

KELLEY, CHRISTOPHER P.  
11098 BISCAYNE BLVD #205  
MIAMI FL 33161

9. Name and Address of New Registered Agent

Name

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

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

*Christopher P. Kelley*

REGISTERED AGENT MUST SIGN

Date **3-2-99**

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:

*Billy Cameron*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**BILLY CAMERON, INC.**  
DIR.

**3-2-99**

Date

**305 233-0989**

Day or Phone #

CPZ040 (9/98)