

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 # 748270

1. Corporation Name

GORDONVILLE CITIZENS ACTION COMMITTEE, INC.

Principal Place of Business  
C/O DONNIE M. ALLEN  
2393 GRIFFIN ROAD  
BARTOW, FL 33830

Mailing Address  
P.O. BOX 691  
EAGLE LAKE, FL 33839

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		4. Date Incorporated or Qualified To Do Business in Florida 08/01/79	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-3458331	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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
P/D	DONNIE M. ALLEN	2393 Griffin Road Bartow, FL 33830	Bartow FL. 33830
VP/D	DORIS DRAYTON	3215 South Avenue	Bartow FL. 33830
T/D	ROBERT L. JACKSON	2817 Richardson Road	Bartow FL. 33830
S/D	CONSUELA Y. CRUZ	3625 Old Eagle Lake Rd	Bartow FL. 33830

REINSTATEMENT

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name DONNIE M. ALLEN	
Street Address (P.O. Box Number is Not Acceptable) 2393 Griffin Road	
Suite, Apt. #, Etc.	
City Bartow, Florida 33838	
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 Donnie M. Allen  
REGISTERED AGENT MUST SIGN

Date 12/28/78

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: DONNIE M. ALLEN  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12/28/98 (941) 326-6609

CR2E046 (1/98)