PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 NOV 24 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 755355

1. Corporation Name

Orange Blossom Chapter of Pancretan Association of America, Inc.

REINSTATEMENT 02-03

2. Principal Office Address		**3.** Mailing Office Address	
1821 Curlew Road		1821 Curlew Road	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Palm Harbor, FL		City & State: Palm Harbor, FL	
Zip: 34683	Country: USA	Zip: 34683	Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 12/02/80

5. FEI Number: N/A — ☐ Applied For ☑ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ — $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Michael E. Boutzoukas, Esq.

Street Address (P.O. Box Number is Not Acceptable): 704 W. Bay St.

Suite, Apt. #, Etc.:

City: Tampa — State: FL — Zip Code: 33606

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8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Michael E. Boutzoukas
REGISTERED AGENT MUST SIGN

Date: 11/17/03

CR2E081 (10/02)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Emmanuel Zervos	1821 Curlew Rd.	Palm Harbor, FL 34683
S/D	Georgine Votzakis	1821 Curlew Rd.	Palm Harbor, FL 34683
T/D	Costas Minotakis	1821 Curlew Rd.	Palm Harbor, FL 34683
VP	George Protopapadakis	1821 Curlew Rd.	Palm Harbor, FL 34683
D	John Bitetzakis	1821 Curlew Rd.	Palm Harbor, FL 34683
D	John Broulis	1821 Curlew Rd.	Palm Harbor, FL 34683

10. 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: M Zervos
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

TR