

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
01 OCT 19 AM 10:30

DOCUMENT # 764413

1. Corporation Name
JACKSONVILLE, FLORIDA, BIG "O" CHAPTER OF THE
SOCIETY FOR THE PRESERVATION AND ENCOURAGEMENT
OF BARBERSHOP QUARTET SINGING IN AMERICA, INC

2. Principal Office Address
2547 HYDE PARK RD

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
JACKSONVILLE, FLORIDA

City & State
Same

Zip
32210

Country
USA

Zip

Country

REINSTATEMENT 06-01

4. Date Incorporated or Qualified
To Do Business in Florida 9 AUG 1982

5. FEI Number 59-1981228 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 George W. Allen
Street Address (P.O. Box Number is Not Acceptable) 2547 HYDE PARK RD.
Suite, Apt. #, Etc.
City JACKSONVILLE, FLORIDA State FL Zip Code 32210

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 George W. Allen Date 10/15/01
REGISTERED AGENT MUST SIGN

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
PD	RICHARD STUD STILL	3463 SIMCA Dr W	JACKSONVILLE, FL 32277
VD	ERNEST ROUNTREE	10932 Clairboro, Rd. E	JACKSONVILLE, FL 32223
VD	BILL VOCKELL	495 Roberts Rd	Jacksonville, FL 32259
D	JACK FEENEY	10878 SCOTT Mill Rd	Jacksonville, FL 32223
D	SAMUEL FRANKHOUSER	8729 Leprechaun CT	Jacksonville FL 32216
STD	George W. Allen	2547 HYDE PARK RD	Jacksonville FL 32210

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: George W. Allen, George W. Allen Date 10/15/01 904-772-0237
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E081 (9/00)