PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

98 AUG 17 AM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # 765679(6)

1. Corporation Name

FRATERNAL ORDER OF POLICE, STATE OF FLORIDA, DISTRICT 7 INC.

Principal Place of Business	Mailing Address
Residence	PO Box 2055 Windermere, FL 34786

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

REINSTATEMENT 97-98

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
9940 Lone Tree Ln.	PO Box 2055
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orlando, Florida	City & State: Windermere, Florida
Zip: 32836 Country: Orange	Zip: 34786 Country: Orange

4. Date Authorized to Do Business in Florida

5. FEI Number: 59-2158232 ☐ 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
PDD	Ron Bartholome	9940 Lone Tree Ln.	Orlando, FL 32836
VD	David Scott	5341 Michigan Ave.	Sanford, FL 32771
T	Julia Slusser	3239/3241 E. Silver Springs Bv.	Ocala, FL 34470
SD	David Martin	1004 Taproot Drive	Winter Springs, FL 32708

8-19-98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name: Ron Bartholome
Street Address (P.O. Box Number is Not Acceptable): 9940 Lone Tree Ln.
Suite, Apt. #, Etc.:
City: Orlando State: FL Zip Code: 32836

CR2E040 (1/98)

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: Ron Bartholome
REGISTERED AGENT MUST SIGN

Date: 07-28-98

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: Ron Bartholome Ron BARTHOLOME 07/28/98 (407) 876-7377
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #