

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 MAR 20 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 769415

1. Corporation Name

MANATEE COUNTY SAFETY COUNCIL, INC.

Principal Place of Business

Mailing Address

430 OLD MAIN STREET
BRADENTON, FL 33505

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

2. New Principal Office Address, If Applicable

910 19TH AV W
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

910 19TH AV W
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

07/15/83

5. FEI Number

59-2097996

Applied For

Not Applicable

City & State

BRADENTON, FL

City & State

BRADENTON, FL

Zip

34205

Country

MANATEE

Zip

34205

Country

MANATEE

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
P/D	RON KOPER	1411 9TH ST W	BRADENTON, FL 34205
C/D	MATT MCKINNON	1304 27TH AV W	BRADENTON, FL 34205
VP/D	JAMES THIGPEN	4100 ELDORADO	BRADENTON, FL 34205
S/T/D	HUGH MCELHINEY	1716 63RD AVE W	BRADENTON, FL 34243
PP/D	RON GETMAN	215 CHEVY CHASE DR	SARASOTA, FL 34243

8. Name and Address of Current Registered Agent

JAMES W. KNOWLES
430 OLD MAIN ST
BRADENTON, FL 33505

9. Name and Address of New Registered Agent

Name

ROBERT C. HILL

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

5309 4TH AVE W

Suite, Apt. #, Etc.

400002467094--1

City

BRADENTON, FL

***910.00

***910.00

FL

34209

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

Robert C Hill

REGISTERED AGENT MUST SIGN

Date

3/18/98

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)(f), 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.

RON KOPER

SIGNATURE:

Ron Koper

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-19-98

Date

748-0800 X277

Daytime Phone #

CR2E040 (1/98)