

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS

99 AUG -5 PM 3:15

DOCUMENT # 771297

1. Corporation Name
The Central Florida Chapter of
Clinical Laboratory Management Assoc Inc

300002957383--6
-08/11/99--01081--001
****297.50 ****297.50

Principal Place of Business Mailing Address

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

REINSTATEMENT 8/16/99

2. New Principal Office Address, If Applicable 1114 Black Acre Trail Suite, Apt. #, etc.		3. New Mailing Office Address, If Applicable Same as 2 Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 11/16/1983	
City & State Winter Springs, FL		City & State		5. FEI Number 59-2394060	
Zip 32708		Country		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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
Pres	Luisa Malgerstorf	679 San Pablo Avenue Casselberry, FL 32707	Casselberry, FL 32707
VP	Josie Foranoce	205 Milford Haven Lane	Longwood, FL 32779
Sec	Karen Talley	407 Faber Dr.	Orlando, FL 32822
Tres	Maisie Braswell	1114 Black Acre Trail	Winter Springs, FL 32708

8. Name and Address of Current Registered Agent Elizabeth Johnston 2040 Hwy A1A #206 Beach Lab Indian Harbor Beach FL 32937		9. Name and Address of New Registered Agent Name: Maisie Braswell Street Address (Do NOT Use Post Office Box Numbers): 1114 Black Acre Trail Suite, Apt. #, Etc.: City: Winter Springs State: FL Zip Code: 32708	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.05, F.S. Signature of Registered Agent: Maisie Braswell REGISTERED AGENT MUST SIGN Date: 6/16/99			

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☒ (See other side for information on intangible tax.)

2. 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)(j), 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: Maisie Braswell Maisie Braswell 6/16/99 (407) 521-4500 ext. 5133
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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Central Florida Chapter CLMA Officers and Board 1999

Pres: Luisa Malgerstorfe
679 San Pablo Ave.
Casselberry, Fl. 32707

V.P. Josie Foranoce
205 Milford Have Cove
Longwood, Fl. 32779

Sec'y Karen Tally
407 Faber Dr.
Orlando, Fl. 32822

Tres: Maisie Braswell
1114 Black Acre Trail
Winter Springs, Fl. 32708

Board:

D Clyde Lindsey
2050 So. Ridgewood Ave. Apt.M-18
South Daytona, Fl. 32199

D Edwina Szelag
1350 S. Hickory St.
Melbourne, Fl. 32901

D Karen Tinsley
623 Woodland St.
Orlando, Fl. 32806

D Michele Long
1329 Vista Cove Rd.
St. Augustine Fl. 32095

D Marty Miller
1401 Seminole Blvd.
Sanford, Fl. 32771

D Nancy Strain
1880 Pioneer Dr.
Lakeland Fl, 33809