

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
T. Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G78176

1. Corporation Name

BOOKFINDERS FOR CHILDREN, INC.

Principal Place of Business

Mailing Address

% SHARON D. HARTMAN
3916 WOODGREEN WAY
TALLAHASSEE FL 32308

% SHARON D. HARTMAN
3916 WOODGREEN WAY
TALLAHASSEE FL 32308

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

01/06/1984

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2366161

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

32309

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	HARTMAN, SHARON D.	3916 WOODGREEN WAY	TALLAHASSEE FL
			600004705526--8 -12/05/01--01025--006 ****150.00 ****150.00
			LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HARTMAN, SHARON D.
3916 WOODGREEN WAY
TALLAHASSEE FL 32308

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Sharon D. Hartman

Date

REGISTERED AGENT MUST SIGN

11. 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:

SHARON D. HARTMAN
Sharon D. Hartman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Oct. 24, 2001 850 893-3904

FILED

01 NOV -1 PM 4:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CFR2040 (8/01)

2082

BOOKFINDERS
for Children, Inc.

October 29, 2001

To Whom It May Concern at the Department of State:

I did not receive notice of the intent to dissolve this corporation. I am including the corporate fee for the year.

Thank you for attending to this matter.

Sincerely,

Sharon D. Hartman

Sharon D. Hartman, President
Bookfinders for Children, Inc.