

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

14 OCT 22 AM 8:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N00000002499

1. Corporation Name

PENSACOLA CHARTER HALL BUILDING ASSOCIATION, INC.

2. Principal Office Address - No P.O. Box #

519 N PALA FOX ST

Suite, Apt. #, etc.

City & State

PENSACOLA, FL

Zip

32501

Country

US

3. Mailing Office Address

707 E. CERVANTES ST.

Suite, Apt. #, etc.

SUITE B #128

City & State

PENSACOLA, FL

Zip

32501

Country

US

CR2E081 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida

3/18/1924

5. FEI Number

237142603

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

JOHN DICKINSON

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

519 N PALA FOX ST

Suite, Apt. #, Etc.

City

PENSACOLA

State

FL

Zip Code

32501

200265759262  
10/22/14--01029--015 \*\*490.00

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 817.0503, F.S.

Signature of Registered Agent

John A Dickinson

REGISTERED AGENT MUST SIGN

Date

10/20/2014

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
<u>P/D</u>	<u>JOHN DICKINSON</u>	<u>3455 FIRESTONE BLVD.</u>	<u>PENSACOLA, FL 32503</u>
<u>V/D</u>	<u>DAN BOWEN</u>	<u>800 S. F ST.</u>	<u>PENSACOLA, FL 32501</u>
<u>T/D</u>	<u>BILL RENAUD</u>	<u>5260 DURANGO PL</u>	<u>PENSACOLA, FL 32504</u>

**REINSTATEMENT**

OCT 22 2014

P. HUNT

10. E-mail Address: joandickinson3@a Cox. net

(To be used for future annual report notification)

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 807 or 817, 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 807.0401 or 817.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

John A Dickinson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/20/2014

Date

850-452-6164(w)

Original Phone #