

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 FEB 25 AM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N00000005567

1. Corporation Name

Gadsden County Community Resource
Center Inc.

000005049700--7
-03/06/02--01033--012
****297.50 ****297.50

2. Principal Office Address

60 Green Lane

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 584

Suite, Apt. #, etc.

City & State

Gretna, FL

Zip

32332

Country

Gadsden

City & State

Gretna, FL

Zip

32332

Country

Gadsden

**4. Date Incorporated or Qualified
To Do Business in Florida**

8-18-00

5. FEI Number

593668899

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$375 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Menee Rumlin-Bond

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

60 Green Lane

Suite, Apt. #, Etc.

City

Gretna

State

FL

Zip Code

32332

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Menee Rumlin-Bond

Date

2/13/02

REGISTERED AGENT MUST SIGN

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
Dir	Menee Rumlin-Bond	60 Green Lane Gretna, FL	Gretna, FL 32332
Dir	Andre Bond	60 Green Lane	Gretna, FL 32332
Dir	Marsha Fitzgerald	44 Dewey Johnson Ln	Gretna, FL 32332
off	Vincent Rumlin	80 Bradley court	Gretna, FL 32332
off	William Wiggins, II	617 Caldwell St.	Dunway, FL 32353

10. 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:

Menee Rumlin-Bond

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Menee Rumlin-Bond

2/13/02
Date

850 856 5317
Daytime Phone #