

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 DEC 16 AM 8:01

DOCUMENT # N00000007025

1. Corporation Name

AVICULTURE MICROBIOLOGY FOUNDATION, INC.

Principal Place of Business

530 ACACIA ROAD  
VERO BEACH FL 32963

Mailing Address

530 ACACIA ROAD  
VERO BEACH FL 32963



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

10/19/2000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-1021443

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DP	PEFLEY, CHERANE	530 ACACIA ROAD	VERO BEACH FL 32963
D	<del>DOAK, SCOTT A MD</del> <i>Michael E. Mordakheim</i>	<del>3220 DANERN DRIVE</del> <del>4300 E. Hwy 1A</del>	<del>BEAVER CREEK OH 45430</del> <del>496836</del>
D	<del>SEGER, LINDA</del> <i>LINDA Meyer</i>	<del>2878 BISHOP ROAD</del> <i>1963 Fabien Circle</i>	<del>INMAN SC 29349</del> <i>Melbourne, FL 32940</i>
D	<del>DESBOROUGH, LAURELLA</del> <i>DANA Maria KNOX</i>	<del>PO BOX 2352</del> <i>1380 1/2 Court</i>	<del>MIDDLEBURG FL 32050</del> <i>VERO Beach, FL 32960</i>
T	<del>CASMIER, SHARON R</del>	<del>PO BOX 650</del>	<del>SUMNER WA 98300</del>
D	<i>JEAN Pettison</i>	<i>6615 New Tampa Hwy</i> <i>Lakeland FL 33815</i>	<i>Lakeland FL</i> <i>33815</i>

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PEFLEY, CHERANE  
530 ACACIA ROAD  
VERO BEACH FL 32963

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. or 617.0505, F.S.

Signature of  
Registered Agent

*Cherane Pefley*  
SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date

*Oct 24, 2002*

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:

*Cherane Pefley*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*10-24-2002 772-734-4486*

12-13-2002

Dear Mr. Andrew Keenlop:

This was re-directed to another address by mistake.

Aviculture Microbiology Foundation Inc was originally intended to be renewed in July, 2002 however was misspelled by the 'R' missing in Aviculture.

I hope this will reinstate our Foundation

Thank you

Miss. Cherone Paffey, Executive Director