PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

02 APR 26 AM 9:50

N00950 DOCUMENT #

1. Corporation Name

North Port Orchestra Association, Inc.

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2. Principal Office Address	3. Mailing Office Addre	ss		
13801-D S Tamiami :	r 6400 W.	Price Blvd.		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	·	⁻ 4. Date Incorporated or Qualified ⁻ To Do Business in Florida 1/17/	1984
City & State North Port, Florida	City & State North Por	t, Florida	5. FEI Number 592454986	Applied For Not Applicable
34287 Country 34287 USA	342 <u>86</u>	Country	6. CERTIFICATE OF STATUS DESIRED	

7. Name and Address of Current Registered Agent Name 3000054516 Doris T. Johnson 05/06/02--01006 Street Address (P.O. Box Number is Not Acceptable) ****358.75 5709 Kenwood Drive Suite, Apt. #, Etc. Zip Code State City 34287 North Port

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.

Registered Agent

GISTERED AGENT MUST SIGN

Date Upril 23 2002

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Titles City / State / Zip North Port,F1. 34286 v Denise Paetzold 3343 Albin Avenue Venice, F1.34292 904 Groveland Avenue S June Withers North Port, Fl. 34287 2184 Brubeck Т Mary Williams Bradenton, F1.34207 260 Coconut Street Aime Simoneau D North Port, F1. 34287 5709 Kenwood Drive Ρ Doris T. Johnson Venice, Fl. 34293 112 Sandstone Circle D Robert McMullen

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 filling 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:

april 23/02

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D	્ટ્રેaul Svilokos	8455 Manasota Key Road Englewood, Florida 34223
D	Pat Foster	Chamber of Commerce Of North Port 2975 Bobcat Village Center North Port, Florida 34288
D	Terry Miller	Tarpon Coast Bank 1440 Tamiami Trail Suite A North Port, Florida 34287

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April 23, 2002