

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 NOV -6 AM 8:01

DOCUMENT # N01000006370

1. Corporation Name

ACTION FOR SUSTAINABLE COMMUNITIES, INC.

Principal Place of Business

1190 CHRISTMAS TREE RD
MILTON FL 32570

Mailing Address

1190 CHRISTMAS TREE RD
MILTON FL 32570



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

2. New Principal Office Address, If Applicable

427 Chipley Avenue

3. New Mailing Office Address, If Applicable

427 Chipley Ave

4. Date Incorporated or Qualified
To Do Business in Florida

09/07/2001

City & State

Pensacola, FL

City & State

Pensacola FL

5. FEI Number

59-3754541

Applied For

Not Applicable

Zip

32503

Country

USA

Zip

32503

Country

USA

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
D	DESIMONE, PENELOPE	427 CHIPLEY AVE	PENSACOLA FL 32503
D	MIX, LESLIE	1190 CHRISTMAS TREE RD	MILTON FL 32570
D	COREY, PAMELA	5635 HILLTOP DR	PENSACOLA FL 32504

8888888832098
11/06/02--01092--010 **61.25

8. Name and Address of Current Registered Agent

DESIMONE, PENELOPE
427 CHIPLEY AVE
PENSACOLA FL 32503

9. Name and Address of New Registered Agent

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

SIGNATURE REQUIRED
PENELOPE DESIMONE
REGISTERED AGENT MUST SIGN

Date 10/31/02

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:

SIGNATURE REQUIRED
PENELOPE DESIMONE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/31/02 850-433-6714
Date Daytime Phone #

CR2040 (8/02)

October 31, 2002

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

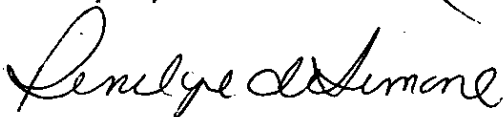
RE: Action for Sustainable Communities, Inc.
Document #: NO1000006370

To Whom It May Concern,

This letter is to serve as a notice to the Department of State to request reinstatement for Action for Sustainable Communities, Inc. To the best of my knowledge, this notice is the first I have received and am responding according to the directions given.

Enclosed is a check for \$61.25 (sixty one dollars and twenty five cents) required by non-profit corporations.

Thank you,



Penelope deSimone
Registered Agent