

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 MAR 24 PM 1:31

DOCUMENT # 1701000007314

1. Corporation Name

Gadsden County R.E.C.A.C.H., Inc.

400031289604  
03/26/04--01097--016 \*\*61.25

**REINSTATEMENT** 03

2. Principal Office Address

508 N. Madison St.

Suite, Apt. #, etc.

3. Mailing Office Address

508 N. Madison St.

Suite, Apt. #, etc.

City & State

Quincy, FL

City & State

Quincy, FL

Zip

32351

Country

Gadsden

Zip

32351

Country

Gadsden

4. Date Incorporated or Qualified  
To Do Business in Florida

10/15/01

5. FEI Number

03-0378721

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$9.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

Nancy Gee

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

508 N. Madison Street

Suite, Apt. #, Etc.

City

Quincy

State  
FL

Zip Code

32351

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

Date

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.	Nancy Gee	508 N. Madison Str.	Quincy, FL <sup>32351</sup> <del>32305</del>
Dir	Angela Burgess	23911 Blue Star Mem. Highway	Quincy, FL 32351
Dir	Sokoya Finch	400 Gaither Drive	Tallahassee, FL 32305

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:

Nancy Gee

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/04

Date

Daytime Phone #

CR2001 (07/04)

March 23, 2004

Florida Department of State  
Secretary of State  
Division of Corporations  
Tallahassee, FL 32314

To Whom It May Concern:

I am writing you this letter to notify you that our agency, Gadsden County R.E.E.A.C.H, Inc. did not receive the paperwork for the annual report filing. The designated Board Member for all of our agency's incoming mail resigned from the organization and did not forward or hand delivered any of our mail to the board members. Therefore, we were not aware of this mail, and we are requesting the removal of the penalty fee as we submit our paperwork for reinstatement.

Thank you,



Sokoya Finch  
Executive Director