

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED
AND
FILED

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

96 DEC -9 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **NO1305**

1 Corporation Name
N.M.B. PYTHIAN SISTERS CHARITIES, INC.

Principal Place of Business Mailing Address
2300 NE 171 STREET
N MIAMI BEACH FL 33160
US
2300-NE-171-STREET
N MIAMI BEACH FL 33160
US

400002026544--9
-12/11/96--01095--007
*****61.25 *****61.25

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02/07/1984	
City & State		City & State		5. FEI Number	
Zip		Zip		23-7561959	
Country		Country		Applied For	
		33162 FL		Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DP	BAGLEY, LOIS O	1468 NE 181 ST	NORTH MIAMI BCH FL
DV	THORNTON, PATRICIA	4649 HAYES ST	HOLLYWOOD FL
DS	VITELLI, JUDY	1080 NE 147 ST	N. MIAMI BCH FL
DT	DERINGER, HARRIET V	12850 SW 6TH ST., K101	PEMBROKE PINES FL
			400002026544--9 -12/11/96--01095--008 ****175.00 ****175.00

REINSTATEMENT 1996

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
BAGLEY, LOIS O 1468 NE 181ST ST NORTH MIAMI BEACH FL 33162		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.
Signature of Registered Agent Lois O. Bagley REGISTERED AGENT MUST SIGN Date Dec 7, 1996

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on intangible tax.)

12. 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: Lois O. Bagley REGISTERED AGENT MUST SIGN Date Dec 7, 1996 Daytime Phone #