96-97 AR

pg. 1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 JUN 16 AM 8:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01438

1. Corporation Name
Alzheimer's Disease and Related Disorders Association - Tampa Bay Chapter

Principal Place of Business
9365 US Hwy 19 N. Suite B
Pinellas Park FL 33782

Mailing Address
Same

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite B
City & State		City & State	Pinellas Park FL
Zip	Country	Zip 33782	Country Hillsborough

4. Date Incorporated or Qualified To Do Business in Florida: 2-14-1984

5. FEI Number: 59-2378435 ☐ Applied For ☐ Not Applicable

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
Pres	Howard Dodge	Long Shadow Inn 627 Highland Ave	Dunedin FL 34698
VP/D	Charlotte Howard	Balloons & more 1907 Shannonwood Ct	Brandon FL 33510
Treas/D	Jewel Curley	Same 7929 Jaywood Rd	Largo FL 33777
Sec/D	Marti Stodola	Same 20116 Gulf Blvd #4	Indian Shores Beach 33785
Exec Dir/D	Eric Greene	~~3012 W. Bay Vista~~ 9365 U.S. Hwy 19 No #B	Pinellas Park FL 33782 ~~Tampa FL 33609~~

8. Name and Address of Current Registered Agent
Kirk Gibbons
3321 Henderson Blvd
Tampa FL. 33609

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

100002215257--5
-06/16/97--01032--011
****122.50 ****122.50

CR2E040 (12/96)

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: [signature] REGISTERED AGENT MUST SIGN
Date: 6/10/97

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: Eric Greene
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-23-97
Date

813-578-2558
Daytime Phone #

pg. 2062

ALZHEIMER'S® ASSOCIATION

Someone to Stand by You

TAMPA BAY CHAPTER

May 23, 1997

Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

To whom it may concern:

Enclosed you will find a Reinstatement Application along with a check, check #1900, for the amount of $122.50. We were informed by your office that as a non-profit organization, this amount excludes the reinstatement fee, and consists of the Annual Report Fee for the past two years.

The document number of this corporation is N01438.

Thank you for your assistance.

Sincerely,

Eric Greene

Eric Greene
Executive Director

Enclosures

ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOC. INC.
TAMPA BAY CHAPTER SERVING HILLSBOROUGH, PINELLAS AND POLK COUNTIES
9365 U.S. Hwy. 19 North, Suite B • Pinellas Park, FL 33782 • (813) 578-2558 • Fax 578-2286 • 1-800-772-8672