

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 28 AM 10:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N02000006158**

1. Corporation Name

**THE GOOD SAMARITAN PRAYER BAND INC.**

Principal Place of Business

Mailing Address

2521 CENTRAL AVE  
SARASOTA FL 34234

2521 CENTRAL AVE  
SARASOTA FL 34234

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.

City & State

City & State

Zip

Country

Zip

Country

**REINSTATEMENT 03**



000024184990

10/23/03--01004--022 \*\*236.25

4. Date incorporated or Qualified  
To Do Business in Florida

08/12/2002

5. FEI Number

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)<br>1 | Name of Officers<br>and/or Directors<br>2 | Street Address of Each<br>Officer and/or Director<br>3 | City / State / Zip<br>4 |
|---------------|---|--|-------------------------|
| PD            | MC GEE, SARAH A                           | 2521 CENTRAL AVE                                       | SARASOTA FL 34234       |
| VD            | MC GEE, BUCK                              | 2521 CENTRAL AVE                                       | SARASOTA FL 34234       |
| TD            | RANDALL, JOSEPH L                         | 2146 N TUTTLE AVE                                      | SARASOTA FL 34234       |
| SD            | COATS, MYRTLE                             | 1445 17 ST   | SARASOTA FL 34234       |
|               |   |  |                         |
|               |   |  |                         |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MC GEE, SARAH A  
2521 CENTRAL AVE  
SARASOTA FL 34234

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

*SARAH A. MC GEE*  
REGISTERED AGENT MUST SIGN

Date 10-24-03

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:

*SARAH A. MC GEE*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-24-03 941-365-6046

CRE040 (7/03)