

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 AUG 25 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **NO3000005297**

1. Corporation Name

**FILIPINO AMERICAN COALITION OF
FLORIDA, INC.**

2. Principal Office Address - No P.O. Box #

500 N. John Young Pkwy

Suite, Apt. #, etc.

City & State

KISSIMMEE, FLORIDA

Zip

34741

Country

USA

3. Mailing Office Address

500 N. John Young Pkwy

Suite, Apt. #, etc.

City & State

KISSIMMEE, FLORIDA

Zip

34741

Country

USA

REINSTATEMENT

CR2E081 (12/07)

06-08

4. Date Incorporated or Qualified
To Do Business in Florida

6/18/2003

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

VALENTIN F. DAGANI JR.

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

500 N. John Young Pkwy.

Suite, Apt. #, Etc.

City

KISSIMMEE

State

FL

Zip Code

34741

☐ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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08/25/08--01061--011 **366.75

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

Valentin F. Dagani Jr.

REGISTERED AGENT MUST SIGN

Date **AUGUST 21, 2008**

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
P	LITA A. MARTIJA	1719 CROCKER AVE.	ORLANDO, FLORIDA 32806
V	ROMY DE LA PAZ	3234 ABBOT AVE. N.E	PALM BAY, FLORIDA 32905
S	JOSEPHINE KERSHAW	1719 CROCKER AVE.	ORLANDO, FLORIDA 32806
T	LUZ MOJICA	6280 TOYOTA DRIVE	JACKSONVILLE, FLORIDA 32244
D	VALENTIN F. DAGANI JR	2318 INDIAN MOUND TRAIL	KISSIMMEE, FLORIDA 34741
D	JOCelyn BRUCE	659 NE 135TH STREET	NORTH MIAMI, FLORIDA 33161

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 contained in Chapter 119, 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:

VALENTIN F. DAGANI JR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AUGUST 21, 2008

Date

(407) 460-2870

Daytime Phone #

8/26