

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N04000011061

1. Corporation Name

Rolling Thunder Florida Chapter VI, Inc

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

9826 62nd Terrace N

Suite, Apt. #, etc.

City & State

St Petersburg FL

Zip

33708

Country

USA

3. Mailing Office Address

9826 62nd Terrace N

Suite, Apt. #, etc.

City & State

St Petersburg FL

Zip

33708

Country

USA

7. Name and Address of Current Registered Agent

Name

Frances Harrison

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

9826 62nd Terrace N

Suite, Apt. #, Etc.

City

St Petersburg

State

FL

Zip Code

33708

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

REGISTERED AGENT MUST SIGN

Date **4 February 2009**

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	Jan A. Baker	210 Centennial lane	Daytona Beach FL 32119
VP	David MacMorran	114 Boxwood Drive	Davenport FL 33837
T/S	Frances Harrison	9826 62nd Terrace N	St Petersburg FL 33708
C	George Woolverton	2504 Brimhollow Drive	Valrico FL 33596
D	John Harrison	9826 62nd Terrace N	St Petersburg FL 33708
D	Raymond Johnson	8010 Oak Run Circle	Lakeland FL 33809

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:

Frances Harrison

4 February 2009

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FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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02/10/09--01006--007 **192.50

REINSTATEMENT

07-09

4. Date Incorporated or Qualified
To Do Business in Florida

30 November 2004

5. FEI Number

20-1756251

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

☒ 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.

2/11/09