

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 OCT 16 AM 8:27

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 1105000005354

1. Corporation Name

FIRST NATIONS INTERTRIBAL ASSOCIATION, INC.

2. Principal Office Address

615 E. DITMAR ST

Suite, Apt. #, etc.

City & State

PENSACOLA, FL

Zip

32503

Country

ESCAMBIA

3. Mailing Office Address

615 EAST DITMAR ST.

Suite, Apt. #, etc.

City & State

PENSACOLA, FL

Zip

32503

Country

ESCAMBIA

4. Date Incorporated or Qualified
To Do Business in Florida

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

GEORGE B. DODGE SR.

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

615 EAST DITMAR ST.

Suite, Apt. #, Etc.

City

PENSACOLA,

State

FL

Zip Code

32503

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

George B. Dodge Sr.

REGISTERED AGENT MUST SIGN

Date 9 OCT '06

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
PD	GEORGE B. DODGE SR	615 EAST DITMAR ST.	PENSACOLA, FL 32503
VPD	DAVID MALICOAT	6483 BERRY HILL RD	MILTON, FL 32570
TR	JAMES HARMON	3610 CHERRY LAUREL DR	PENSACOLA, FL 32504
SD	LACY HAMILTON	116 S. 2ND ST.	PENSACOLA, FL 32507
D	MARLENE DETIENNE	1280 MAHOGANY HILL RD	PENSACOLA, FL 32507
D	MICHAEL MCCARTAN	1221 E. MORENO ST.	PENSACOLA, FL 32503

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:

George B. Dodge Sr.
GEORGE B. DODGE SR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9 OCT. '06 850-474-1842

Date

Daytime Phone #