

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**
FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

09 MAY 27 AM 8:56

DOCUMENT # N06000004241

1. Corporation Name

Putnam Citizens Alliance, Inc.

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

105 Morris Street

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Palatka, Florida

City & State

Zip

32174

Country

Putnam

Zip

Country

000156511440

05/28/09--01017--021 **358.75

CR2E081 (12/08)

4. Date Incorporated or Qualified
To Do Business in Florida

4/13/06

5. FEI Number

16-1756774

☐ Applied For☐ Not Applicable6. CERTIFICATE OF STATUS DESIRED ☐\$9.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Michael Woodward

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

501 Atlantic Avenue

Suite, Apt. #, Etc.

City

Interlachen

State

FL

Zip Code

32148

☐ 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.

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 5/19/2009

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
	See Attached List		

REINSTATEMENT 07-09 KS

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Richard A. P... 5/21/09

PUTNAM CITIZENS ALLIANCE – updated 4/25/09**Officers & Board Members were elected 5 April 2008**

NAME:	Email	Mailing Address	Dues
Officers:			
President:			
Richard Perallon 328.4821	raperallon@yahoo.com	105 Morris St Palatka 32177	✓ 2/09
Vice President:			
Sharon Jax 684.6929 c:972.6929202	SCWT10@aol.com	202 Neilsen Ave Interlachen FL 32148	✓ 1/09
Secretary: Rissi Cherie 684.2650	rcherie@alltel.net	POB 1810 Interlachen FL 32148	✓ 6/08
Treasurer: Jay Jax 684.6929	mebluejay@aol.com	202 Neilsen Ave Interlachen FL 32148	✓ 1/09
Board of Directors:			
Public Relations:			
Michael Woodward 368.4673	keyserandwoodward@windstream.net	POB 92 Interlachen FL 32148	✓ 6/08
James MacDonald 386.467.2231	j-cmacdonald@peoplepc.com	125 Hardrow St Satsuma FL 32189	✓ 2/09
Jim Smith	Morehomesbyjim@aol.com	123 Sand Lake Rd Interlachen FL 32148	✓ 2/09
Tom Stevens 386.698.4229	tmstvns@windstream.net	494 Clifton Rd Crescent City 32112	✓ 2/09
Earl Ballengee 698.4168	EABEAB@windstream.net	496 Clifton Rd Crescent City 32112	✓ 1/09
Carol MacDonald 386.467.2231	j-cmacdonald@peoplepc.com	125 Hardrow St Satsuma FL 32189	✓ 2/09