

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 MAY 20 PM 3:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N12108

1. Corporation Name

VOLUSIA COUNTY HEALTH DEPARTMENT EMPLOYEES ASSOCIATION, INC.

Principal Place of Business

501 S. CLYDE MORRIS BLVD.
DAYTONA BEACH FL 32114-3929

Mailing Address

501 S. CLYDE MORRIS BLVD.
DAYTONA BEACH FL 32114-3929

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/15/1985

5. FEI Number

59-2895495

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)

| 1 Title(s) | 2 Name of Officers and/or Directors | 3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | 4 City / State / Zip |
|---------------|--|--|--|
| PD | LEAGLE, PATRICIA KAUFFMAN, MARCIA | 572 REED CANAL ROAD #78 501 S. Clyde Morris Blvd | S. DAYTONA FL 32119 Daytona Beach FL 32114 |
| TD | MEDEIROS, CAROL MARTIN Patricia Dianna MAYLEN | 2655 ARLINGTON AVENUE 501 S. Clyde Morris Blvd | NEW SMYRNA BEACH FL 32168 Daytona Beach FL 32114 |
| VPD | CAN, ROXANNE PATRICK Diana | 194 RIDGE ROAD 501 S. Clyde Morris Blvd | OAK HILL FL 32759 Daytona Beach FL 32114 |
| S | SERVOS, KATHY FORTHAM HARRIET | 44316 LAKE MACK DRIVE 501 S. Clyde Morris Blvd | DELAND FL 32720 Daytona Beach FL 32114 |
| | | | 000002544440-7 06/02/98-01063-0116 ****297.50 ****297.50 |

8. Name and Address of Current Registered Agent

LEAGLE, PATRICIA
501 S CLYDE MORRIS BLVD
DAYTONA BCH FL 32114

9. Name and Address of New Registered Agent

Name

MARCIA KAUFFMAN

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

501 S. Clyde Morris Blvd

Suite, Apt. #, Etc.

City

Daytona Beach

State
FL

Zip Code
32114

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.

Signature of
Registered Agent

Marcia Kauffman

REGISTERED AGENT MUST SIGN

Date 1-24-98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information
on Intangible tax.)

12. 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:

Marcia Kauffman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24-98

Date

904 947-3401

Daytime Phone #

CR20040 (8/97)