## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION
REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

AND

05 JUL 13 PM 1:38

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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1. Corporation Name

National Conference of Firemen and Oilers Local 1220 AFLCIO SEIU CLC, Inc. Document #N15411

2. Principal Office c/o Frederic	e Address ck D. Winters	3. Mailing Office Address Post Office Box 10157		
Sulte, Apt. #, etc. 1243 Centr	al Avenue	Sulte, Apt. #, etc.		
City & State		City & State		
St. Petersbu	ırg, FL	St. Petersburg,	FL	
Zip 33705	Country USA	Zip 33733-0157	Country USA	

REINSTATEMENT()	) <u>:</u>
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4. Date Incorporated or Qualified To Do Business in Florida 06/1

06/13/1986

**5.** FEI Number 237347454

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 Frederick D. Winters			
Ì	Street Address (P.O. Box Number is Not Acceptable) 1243 Central Avenue			
	Sulte, Apt. #, Etc.			··· · · · · · · · · · · · · · · · · ·
	St. Petersburg	State FL	Zip Code 33705	

8. I, being appointed the registered	egent 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 Fishery D. Winter

REGISTERED AGENT MUST SIGN

Date 7-11-05

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	Frederick D. Winters	664 63rd Street South	St. Petersburg, FL 33707
VP	Roger Clay	1710 Sanderling Court	Brandon, FL 33511
ST	Mark Patrick	11675 9th Avenue North, #3	St. Petersburg, FL 33716
RS	John Bedron	3057 Crest Drive	Clearwater, FL 33759
			Z00057893322 17/21/05µ0300_**420.00
		(	07/26/0501019010 **420.00 07/26/0501019011 **8.75

10. I certify that I am an officer or director or the receiver or trustae 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!

Freseried D. Winder

7-11-05

727-822-7462

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Daytime Phone #

JR2E081 (01/05)