

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # N-17281

1. Corporation Name

The GFWC Tampa Jr. Woman's Club, Inc.

Principal Place of Business

2901 Bayshore Blvd.
Tampa, FL 33629-7404

Mailing Address

4409 W. Varn Ave.
Tampa, FL 33616

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

10/3/86

5. FEI Number

59-6159892

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
President	Stauffer, Sharon	8649 N. Himes Ave. (D)	Tampa, FL
Vice President	Lupia, Elizabeth	1210 Druid (D)	Tampa, FL 33629
Secretary	McElfatrick, Heather Ann	6301 S. Westshore #1420 (D)	Tampa, FL 33616
Treasurer	Geary, Cathy	4409 W. Varn Ave. (D)	Tampa, FL 33616

200002643592-3

-09/18/98-01078-003

****420.00 ****420.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Geary, Cathy
4409 W. Varn Avenue
Tampa, FL 33616

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Cathy Geary

REGISTERED AGENT MUST SIGN

Date

8/23/98

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:

Cathy Geary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Treasurer

8/23/98
Date

(813) 978-7528
Daytime Phone #