

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 DEC 21 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N19067

1. Corporation Name

NESRA of Northeast Florida

Principal Place of Business

Mailing Address

Melanie McGregor
11635 Lady Clare Ct.
Jax., FL 32223

P.O. Box 566AS
Jacksonville, FL 32241

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

2/3/87

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

☒ Not Applicable

Zip

Country

Zip

Country

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
Pres.	Melanie McGregor D	11635 Lady Clare Ct.	Jacksonville, FL 32223
VP	Angela Edwards D	1562 Atlantic Blvd.	Jacksonville, FL 32207
Sec.	Josey Gray D	10151 Deerwood Park Blvd.	Jacksonville, FL 32256
Treas.	Carol Buie D	323 E. Bay St.	Jacksonville, FL 32202
P. Pres.	William Tomlinson D	4567 St. Johns Bluff Rd.S.	Jacksonville, FL 32224

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Melanie McGregor
11635 Lady Clare Ct
Jax., FL 32223

REINSTATEMENT 98-0078

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

Suite, Apt. #, Etc.

900003514969--0

City

-12/28/00--01006--025

****358-FL ****358.75

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

Melanie K. McGregor

REGISTERED AGENT MUST SIGN

Date 4/29/2000

11. This corporation owes 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Melanie K. McGregor

Date

Daytime Phone #

12/13/00 262-9539

(904)