

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 NOV 12 AM 11:38

DOCUMENT # N 22914

**1. Corporation Name**

FRIENDS OF TAMPA DAY SCHOOL, INC.

**2. Principal Office Address**

12606 HENDERSON RD ← → SAME

Suite, Apt. #, etc.

**3. Mailing Office Address**

Suite, Apt. #, etc.

City & State

TAMPA, FL ← → SAME

Zip

33625

Country

USA

Zip

← → SAME

Country

"

**4. Date Incorporated or Qualified  
To Do Business in Florida**

11/30/01

**5. FEI Number**

Applied For

☒ Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☒**

\$8.75 Additional Fee required  
for a Certificate of Status

REINSTATEMENT 04

**7. Name and Address of Current Registered Agent**

Name

ANDREA M. MOWATT-GREENE

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

15104 SHAW ROAD

Suite, Apt. #, Etc.

City

TAMPA

State

FL

Zip Code

33625

**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

Andrea M. Mowatt-Greene

Date 11/9/04

REGISTERED AGENT MUST SIGN

**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
CHAIR	Jeri Jesson	4904 LFFORD CAY RD TAMPA, FL 33629	TAMPA FL 33629
VICE CHAIR	Lynne Funds	10002 Hampton Place	Tampa FL 33618
TREASURER	Sheff Crowder	1208 S. Albany	Tampa, FL 33606
SECRETARY	Dawn Sims	9425 Bluebird Dr.	Tampa, FL 33647
SCHOOL LIAISON	Andrea Mowatt-Greene	15104 SHAW ROAD	TAMPA, FL 33625

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11/12/04--01027--004 \*\*\*245.00

**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 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:

Andrea Mowatt-Greene

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/02/04

Date

883-269-2100

Daytime Phone #

CR2001 (01/04)

11/18/04