

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 FEB -9 PM 4:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N23261

1. Corporation Name

Ladies
Fraternal Order of Eagles #3752 Auxiliary Inc.

600143188066
02/09/09--01055--004 **481.85

REINSTATEMENT 05-09

600143188066
02/09/09--01055--004 **481.85 WOP

2. Principal Office Address - No P.O. Box #

4149 New River Rd

3. Mailing Office Address

Same

Suite, Apt. #, etc.

N/A

Suite, Apt. #, etc.

—

City & State

Zephyrhills Florida

City & State

—

Zip

33543

Country

Pasco

Zip

Country

—

4. Date Incorporated or Qualified
To Do Business in Florida

10/30/987

5. FEI Number

31-0915379

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

Kay Parker

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

4488 Stillman St.

Suite, Apt. #, Etc.

N/A

City

Zephyrhills

State

FL

Zip Code

33540

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

Maitha Kay Parker

Date 2-4-09

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
Pres	Kay Parker	4488 Stillman St	Zephyrhills FL 33540
V.P.	Helen Mulgrew	35346 Tamar Ave	Zephyrhills FL 33541
Sec	Anna Fulk	34304 Lodge Dr	Zephyrhills FL 33543
Treas	Esther Niaporuk	2689 Trinity Circle NW	Zephyrhills FL 3354
Trustee	Michelle Nannes	6141 Zephyr Ridge Dr	Zephyrhills FL 33542
Trustee	Frances Schular	P.O. Box 506	Crystal Springs 33524

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 contained in Chapter 119, 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:

Anna Fulk Anna Fulk

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-4-09

Date

813

598-8938

Daytime Phone #