

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 MAR 16 AM 9:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N29952

1. Corporation Name

Constituency For Children and Youth of
Volusia County, Inc.

2. Principal Office Address

P.O. Box 2509

Suite, Apt. #, etc.

City & State

Daytona Beach, FL

Zip

32115

Country

United States

3. Mailing Office Address

P.O. Box 2509

Suite, Apt. #, etc.

City & State

Daytona Beach, FL

Zip

32115

Country

United States

REINSTATEMENT 95-06

**4. Date Incorporated or Qualified
To Do Business in Florida** -12/29/88-

5. FEI Number

593007857

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

Palmetto Charter Services

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

150 Magnolia Avenue

Suite, Apt. #, Etc.

City

Daytona Beach

State

FL

Zip Code

32014

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

REGISTERED AGENT MUST SIGN

Date

3/13/01

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
D/P	Donna Marietta	121 W. Pennsylvania Avenue	DeLand, FL 32720
D/VP	Joe Sullivan	121 W. Pennsylvania Avenue	DeLand, FL 32720
D	Bonita Sorensen	121 W. Pennsylvania Avenue	DeLand, FL 32720
D/S	Ann Rogers-Fox	121 W. Pennsylvania Avenue	DeLand, FL 32720
D/T	Dorie Gluz	121 W. Pennsylvania Avenue	DeLand, FL 32720
See Attached for Additional Directors			

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/27/01

Daytime Phone #

386-238-3830

282

Attachment for Corporate Reinstatement

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City/State/Zip
D	Mary Durr	121 W. Pennsylvania Avenue	DeLand, FL 32720
D	Lizzie Flynt	121 W. Pennsylvania Avenue	DeLand, FL 32720
D	Deanna schaeffer	121 W. Pennsylvania Avenue	DeLand, FL 32720
D	Jessica Kauffman	121 W. Pennsylvania Avenue	DeLand, FL 32720
D	Linda Merrell	121 W. Pennsylvania Avenue	DeLand, FL 32720
D	Jessie Clark	121 W. Pennsylvania Avenue	DeLand, FL 32720
D	Vernelle Sessions	121 W. Pennsylvania Avenue	DeLand, FL 32720
D	Mary Jo Murphy	121 W. Pennsylvania Avenue	DeLand, FL 32720
D	Martha Aldrich	121 W. Pennsylvania Avenue	DeLand, FL 32720
D	Christine Davenport	121 W. Pennsylvania Avenue	DeLand, FL 32720
D	Jim Bryan	121 W. Pennsylvania Avenue	DeLand, FL 32720