

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 JUN -5 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1733281

1. Corporation Name

Northwest Community Development
Corporation of West Palm Beach

2. Principal Office Address

638 6th Street

Suite, Apt. #, etc.

City & State

West Palm Beach FL

Zip

33401

Country

Palm Beach

3. Mailing Office Address

638 6th Street

Suite, Apt. #, etc.

City & State

West Palm Beach FL

Zip

33401

Country

Palm Beach

4. Date Incorporated or Qualified
To Do Business in Florida

July 17, 1989

5. FEI Number

65-0132483

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

Tony R. McCray, Jr.

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

638 6th St.

Suite, Apt. #, Etc.

City

West Palm Beach FL

State

FL

Zip Code

33401

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****306.25 ****306.25

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

Tony R. McCray, Jr.
REGISTERED AGENT MUST SIGN

Date 5/18/02

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
CD	Stanley J. Richardson	392-1 Presswick Cir.	Palm Beach Gardens Florida 33418
SD	David Gibson	4200 Community Dr. #607	West Palm Beach Florida 33409
PD	Tony R. McCray Jr.	730 1/2 59th St.	West Palm Beach Florida 33407

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:

Tony R. McCray, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Tony R. McCray, Jr.

Date

5/18/02 (56) 502-3815
Daytime Phone #

CR2E081 (9/99)