

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N 34039  
1. Corporation Name  
Greater Brandon Chapter  
#4442 of AARP, INC.

N 34039

**REINSTATEMENT** 10-11

CR2E081 (11/10)

9/01/1989

2. Principal Office Address - No P.O. Box #  
502 Chilt Dr  
Suite, Apt. #, etc.  
City & State  
Brandon FL  
Zip  
33510 Country  
USA

3. Mailing Office Address  
502 Chilt Dr  
Suite, Apt. #, etc.  
City & State  
Brandon, FL  
Zip  
33510 Country  
USA

4. Date Incorporated or Qualified  
To Do Business in Florida. 9/01/1989

5. FEI Number  
934100 344 ☐ 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  
C.T. Corporation System  
Street Address (P.O. Box Number is Not Acceptable)  
1200 S. Pine Island Rd.  
Suite, Apt. #, Etc.  
City  
Fort Lauderdale State  
FL Zip Code  
33328

JEAN L

400211667864  
09/01/11--01018--004 \*\*237.50

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 Jean L. Popovich Treasurer Date 8/18/2011  
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
P	Celeste Miller	408 3RA STREET	BRANDON, FL 33511
V	Rita Fitzsimmons	804 Antler Court	BRANDON, FL 33511
S	Susan Antinora	410 Coboose Lane	BRINCO, FL 33594
T	Jean L Popovich	502 Chilt Dr	BRANDON, FL 33510
D	Katheryn Castillo	117 Morrow Circle	BRANDON, FL 33510
D	Betty Boyd	13438 SILVER CR DR	RIKENVIEW, FL 33569

10. E-mail Address: DRISON rehad@verizon.net  
DRISON (To be used for future annual report notification) rehad@verizon.net

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

SIGNATURE: Jean L. Popovich Jean L. Popovich 8-18-2011  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #