

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N35899

1. Corporation Name

FLORIDA'S MARIAN CENTER FOR PEACE, INC.

Principal Place of Business

% JAMES HYLAND  
5700 FOURTH ST. NORTH  
ST. PETERSBURG FL 33703  
US

Mailing Address

% JAMES HYLAND  
5700 FOURTH ST. NORTH  
ST. PETERSBURG FL 33703  
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT

99

4. Date Incorporated or Qualified  
To Do Business in Florida

12/26/1989

5. FEI Number

65-0169178

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75. A fee of \$10.00 is required for a Certificate of Status.

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Title(s) | Name of Officers and/or Directors | Street Address of Each Officer and/or Director                   | City / State / Zip                         |
|----------|-----------------------------------|--|--|
| 1        | 2                                 | 3  | 4  |
| D        | HYLAND, JAMES M. JR.              | <del>1630 G ROYAL PALM DR</del><br>5839. 51 <sup>ST</sup> ST. S. | ST PETERSBURG FL <del>33702</del><br>33715 |
| D        | ROMANO, JUDY                      | 9160 BLIND PASS RD   | ST. PETERSBURG FL 33706                    |
| D        | PREG, FRANK                       | 2014 TANGLEWOOD WAY, NE  | ST. PETERSBURG FL 33702                    |
|          |                                   |  | 400003069644--3                            |
|          |                                   |  | 12/14/99-01083-008                         |
|          |                                   |  | ****236.25 ****236.25                      |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HYLAND, JAMES M. JR.

~~1630 G ROYAL PALM DR~~  
ST. PETERSBURG FL 33702  
5839. 51<sup>ST</sup> ST. S.  
ST. PETERSBURG  
FL. 33715

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

James M. Hyland, JR.  
REGISTERED AGENT MUST SIGN

Date NOV 22, 99

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., 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:

James M. Hyland, JR.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NOV 22, 99 727.5265160  
Date Daytime Phone #

KE