

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
11 DEC - 2 PM 4:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N37651

1. Corporation Name

Tampa Bay Children's Chorus, Inc.

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

502 Druid Hills

Suite, Apt. #, etc.

3. Mailing Office Address

502 Druid Hills

Suite, Apt. #, etc.

City & State

Temple Terrace, FL

Zip

33617

Country

US

City & State

Temple Terrace, FL

Zip

33617

Country

US

CR2E081 (11/10)

4. Date Incorporated or Qualified  
To Do Business in Florida

April 16, 1990

5. FEI Number

59-3000938

☐ 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

Averill Summer

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

1 Beach Drive SE # 2104

Suite, Apt. #, Etc.

City

St. Petersburg

State

FL

Zip Code

33701

900214817689  
12/02/11--01037--002 \*\*297.50

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

*Averill Summer*  
REGISTERED AGENT MUST SIGN

Date 11/29/11

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	Peter Dunne	921 N. Riverhills Dr.	Temple Terrace, FL 33617
D	Averill Summer	1 Beach Dr. SE Unit 2104	St. Petersburg, FL 33701
S	Ashley M. Whitley	4609 S. Ferdinand Ave.	Tampa, FL 33611
D	Keri Grosso	1353 Windsor Way	Lot 2, FL 33559
REINSTATEMENT			
2010-11			

10. E-mail Address: tbcchorus@gmail.com

(To be used for future annual report notification)

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:

*Keri Grosso*

Keri K. Grosso

Date

11/29/11

Daytime Phone #