

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 MAR 26 PM 12:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N38656**

1. Corporation Name

Tampa Bay Composers' Forum, Inc.

REINSTATEMENT 99-03

2. Principal Office Address

620 31st St. North

3. Mailing Office Address

P.O. Box 16251

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

Zip

33713

Country

USA

Zip

33733

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

1989

5. FEI Number

59-301-6606

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

David Manson

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

620 31st St. North

800014772338

03/26/03--01055--027 **490.00

Suite, Apt. #, Etc.

City

St. Petersburg

State

FL

Zip Code

33713

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

David Manson

Date

3/20/2003

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
Dr.	David Manson	620 31st St. North	St. Petersburg, FL 33713
Dr.	Vernon Taranto	875 S. Village Dr. #201	St. Petersburg, FL 33716
Mr.	A. Paul Johnson	4193 Whiting Dr. SE	St. Petersburg, FL 33705

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:

David Manson

David Manson

3/20/03

(727) 341-4363

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

2/3/21