

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 JAN 13 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N46064

1. Corporation Name

WASHINGTON COUNTY YOUTH FAIR, INC.

Principal Place of Business

1424 JACKSON AVE
CHIPLEY FL 32428

Mailing Address

1424 JACKSON AVE
CHIPLEY FL 32428



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

2. New Principal Office Address, If Applicable

1424 JACKSON AVE

Suite, Apt. #, etc.

Suite A

City & State

Chipley, FL

Zip

32428

Country

USA

3. New Mailing Office Address, If Applicable

1424 JACKSON AVE

Suite, Apt. #, etc.

Suite A

City & State

Chipley, FL

Zip

32428

Country

USA

REINSTATEMENT

96-98

4. Date Incorporated or Qualified
To Do Business in Florida

11/18/1991

5. FEI Number

59-2961419

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee 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 (Do NOT Use Post Office Box Numbers)	City / State / Zip
D	SOLGER, DAVID David Solger	1424 JACKSON AVE 1424 Jackson Ave Suite A	CHIPLEY FL 32428
VD	JOHNSON, JUDY Judy Corbus	1424 JACKSON AVE 1424 Jackson Ave Suite A	CHIPLEY FL 32428
SD	ROBINSON, NANCY Nancy Alexander	1424 JACKSON AVE 1424 Jackson Ave Suite A	CHIPLEY FL 32428
TD	ROBINSON, VICKI Vicki C Lamb	1424 JACKSON AVE 1424 Jackson Ave Suite A	CHIPLEY FL 32428
V	PATE, CLINT Clint Pate	1424 JACKSON AVE 1424 Jackson Ave Suite A	CHIPLEY FL 32428
S	FISHER, LORA Lora Fisher	1424 JACKSON AVE 1424 Jackson Ave Suite A	CHIPLEY FL 32428

8. Name and Address of Current Registered Agent

SOLGER, DAVID
1424 JACKSON AVE
CHIPLEY FL 32428

9. Name and Address of New Registered Agent

Name
David Solger
Street Address (P.O. Box Number is Not Acceptable)
1424 Jackson Ave Suite A
Suite, Apt. #, Etc.
200002407882-4

City

Chipley

State

FL

Zip Code

32428

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

David M. Solger

REGISTERED AGENT MUST SIGN

Date

1-7-98

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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:

Vicki C Lamb

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-98

Date

850-638-2200

Daytime Phone #

CP2E040 (7/96)