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
97 DEC 12 AM 9:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **N48650**

1. Corporation Name

RESIDENT INITIATIVE COUNCIL OF NORTHWOOD VILLAGE, INC.

Principal Place of Business	Mailing Address
1200 NINTH STREET DAYTONA BEACH FL 32117	~~1200 NINTH STREET~~ ~~DAYTONA BEACH FL 32117~~

REINSTATEMENT 97 AR

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip | Country

3. New Mailing Office Address, If Applicable
c/o RAYMOND A. MICLAU, CPA
Suite, Apt. #, etc.
623 N. GRANDVIEW AVE
City & State
DAYTONA BEACH, FL
Zip 32118 | Country USA

4. Date Incorporated or Qualified To Do Business in Florida **04/27/1992**

5. FEI Number **59-3162201** | 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
~~PD~~	~~CASH, RUTH~~	~~1200 NINTH STREET, #42~~	~~DAYTONA BEACH FL~~
~~VPD~~	~~WILLIAMS, THALIA~~	~~1200 NINTH STREET, #5~~	~~DAYTONA BEACH FL~~
SD	LEWIS, ANGELIA	1200 NINTH STREET #41	DAYTONA BEACH FL 32117
TD	WILLIAMS, HATTIE	1200 NINTH ST.#17	DAYTONA BEACH FL 32117
PD	TILLMAN, THOMESENE	1200 NINTH STEET #30	DAYTONA BEACH FL 32117

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8. Name and Address of Current Registered Agent

LEWIS, ANGELA
1200 NINTH STREET
SUITE 41
DAYTONA BEACH FL 32117

9. Name and Address of New Registered Agent

Name THOMASENE TILLMAN
Street Address (P.O. Box Number is Not Acceptable)
1200 NINTH ST, APT # 30
Suite, Apt. #, Etc.
City DAYTONA BEACH | State FL | Zip Code 32117

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 X Mrs Thomasene Tillman
REGISTERED AGENT MUST SIGN
Date

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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: X Mrs Thomasene Tillman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date
Daytime Phone #

CR2E070 (2/96)