

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION FOR REINSTATEMENT**

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



**DOCUMENT #** N51182 **NONPROFIT CORPORATION**

1. Corporation Name  
**DIXIE HOLLINS BAND BOOSTERS, INC.**

FILED  
 99 MAR 11 AM 10:46  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 03/23/99 - 01031 - 017  
 \*\*\*358.75 \*\*\*358.75

Principal Place of Business Mailing Address

4940 62nd St. N % ERIC ENFIELD  
 St. Petersburg, Fl. 7024 69th St. No.  
 33709 St. Petersburg, Fl

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

**REINSTATEMENT 97-99**

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. EEJ Number	
City & State		City & State		Applied For	
Zip		Country		Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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
P	Eric Enfield	7024 69th St. N.	St. Petersburg, Fl 33781
VP	Delana Woods	6229 60th St. No	St. Petersburg, Fl 33709
Sec	Elke Johnson	6120 44th St, No	St. Petersburg, Fl 33709
T	Sheila Padgett	6020 Dunbeath St.	St. Petersburg, Fl 33777
D	Robin Woods	6229 60th St. No.	St. Petersburg, Fl. 33709
D	John Bastow	7020 69th St. No.	St. Petersburg, Fl. 33781

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Waddell, Janet 6922 62nd Ave. No Pinellas Park, Fl 34665		Name Eric Enfield Street Address (P.O. Box Number is Not Acceptable) 7024 69th St. No Suite, Apt. #, Etc. City St. Petersburg	
		State FL	
		Zip Code 33781	

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: *[Signature]* REGISTERED AGENT MUST SIGN Date: 3-8-99

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: *[Signature]* AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 3-8-99 Daytime Phone #: 727 545-2832

CRS2040 (1/99)