

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

99 JUL 26 PM 12:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000001166

1. Corporation Name

Congressional Classroom of Florida's 13th District

Principal Place of Business

Mailing Address

1111 3rd Avenue West
Suite 200
Bradenton, FL 34205

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

2. New Principal Office Address, If Applicable

N/A

3. New Mailing Office Address, If Applicable

N/A

4. Date Incorporated or Qualified
To Do Business in Florida

03/08/1993

5. FEI Number

65-0394031

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT *99*

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
DC	Emily Buskirk	1001 3rd Avenue West, Suite 350	Bradenton, FL 34205
DV	Miller, Dan	1001 3rd Avenue West, Suite 350	Bradenton, FL 34205
DV	Haller, R. Gregory	1001 3rd Avenue West, Suite 350	Bradenton, FL 34205
DTS	Cooper, Debra	1111 3rd Avenue West, Suite 200	Bradenton, FL 34205

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-08/04/99--01074--001
****245.00 ****245.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Haller, Gregory R.
1001 3rd Avenue West
Suite 350
Bradenton, FL 34205

Name
Debra Cooper

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

1111 3rd Avenue West

Suite, Apt. #, Etc.

Suite 200

City

Bradenton

State
FL

Zip Code
34205

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

Debra Cooper

REGISTERED AGENT MUST SIGN

Date

7/9/99

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:

Debra Cooper

DEBRA COOPER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/9/99
Date

941.748.3433
Daytime Phone #

CPREC040 (1/98)