

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 # N93000004558

1. Corporation Name

Resident Initiative Council
of Palmetto Park

W98-28873

99 MAY 24 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

450 Whitney St.
Daytona Beach, FL
32114

Mailing Address

148 Whitney St.
Daytona Beach, FL
32114

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

REINSTATEMENT

94-99

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

9-30-93

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number
59-3558213

Applied For
Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
Pres.	Mary M. Tumer "D"	148 Whitney Street	Daytona Beach, FL 32114
V-Pres.	Phyllis Bryant "D"	112 Hudson Street	Daytona Beach, FL 32114
Secre.	Vanessa Mosley "D"	121 Hawk Street	Daytona Beach, FL 32114
Treas.	Terry Lovette "D"	142 Whitney Street	Daytona Beach, FL 32114

8. Name and Address of Current Registered Agent

Daytona Beach Housing Authority
118 Cedar Street
Daytona Beach, FL 32114

9. Name and Address of New Registered Agent

Name
Donald Cook
Street Address (P.O. Box Number is Not Acceptable)
450 Whitney Avenue
Suite, Apt. #, Etc.
City
Daytona Beach
State
FL
Zip Code
32114

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

REGISTERED AGENT MUST SIGN

Date

4/13/99
2/24/99

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

4-13-99 M.T.
2-22-99
12-17-98
Date
Daytime Phone #
(904)
3320