

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N93000005764**

1. Corporation Name

PALM BEACH COUNTY SCHOOL DISTRICT STAFF ASSOCIATION, INC.

Mailing Address
~~KEVIN JAMES~~
10422 153RD CT. NORTH
JUPITER FL 33478

Principal Place of Business
~~KEVIN JAMES~~
10422 153RD CT. NORTH
JUPITER FL 33478

FILED

97 OCT 17 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 94-97

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

DO NOT WRITE IN THIS SPACE

2. New Mailing Address, If Applicable

PO BOX 15964
Suite, Apt. #, etc.

3. New Principal Office Address, If Applicable

PO BOX 15964
Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida

12/23/1993

5. FEI Number

26-3067638

Applied For

Not Applicable

City & State

WEST PALM BEACH, FLORIDA

City & State

WEST PALM BEACH, FLORIDA

Zip

33416

Country

PALM BEACH

Zip

33416

Country

PALM BEACH

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	CHENECEK, DON	10422 153RD CT. NORTH	JUPITER FL 33478
D	LACHANCE, PAUL	10422 153RD CT. NORTH	JUPITER FL 33478
D	GUSTAFSON, KATHLEEN	10422 153RD CT. NORTH	JUPITER FL 33478
P/D	JANE TERWILLEGAR	911 Oak Harbour Dr. 4343 WOODSTOCK DRIVE	Juno Beach, FL 33408 WEST PALM BEACH, FL 33408
VP/D	ANDI COLEMAN	4191 57TH AVE.	LAKE WORTH, FL 33463
S/D	WANDA HAGAN	2046 N. WATERWAY DR.	JUNO BEACH, FL 33408

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 NAYS ST
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name **DANIEL P. HAAS**
Street Address (P.O. Box Number is Not Acceptable)
10844 RANDOLPH SIDING ROAD
Suite, Apt. #, Etc. **APT 2506**
City **JUPITER**
State **FL** Zip Code **33478**

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

Daniel P. Haas

REGISTERED AGENT MUST SIGN

Date **9-16-97**

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)

12. 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.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Jane Terwillegar, President

9/19/97 561-684-5180