

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

1997 APR -1 PM 3: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **94000002414**

1. Corporation Name

Exit 76 Merchants Association, Inc.

Principal Place of Business

Mailing Address

**502 NW 75th Street Suite 41
Gainesville, FL 32607**

800002131229--4

-04/02/97--01060--009

****297.50 ****297.50

REINSTATEMENT

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

2. New Principal Office Address, If Applicable

6793 Newberry Road

3. New Mailing Office Address, If Applicable

6793 Newberry Road

Suite, Apt. #, etc.

Suite 101

Suite, Apt. #, etc.

Suite 101

City & State

Gainesville, FL

City & State

Gainesville, FL

Zip

32605

Country

U.S.A.

Zip

32605

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

5/13/94

5. FEI Number

59-3249675

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)

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
P/D	Kristen Moore	6419 Newberry Road	Gainesville, FL 32605
V/D	Ron Gromoll	920 NW 69th Terrace	Gainesville, FL 32605
D	Regina Howell	7417 NW 8th Blvd	Gainesville, FL 32605
D	Bill Jordan	6910 NW 8th Avenue	Gainesville, FL 32605
D	Skip Clemons	4000 SW 122nd Street	Gainesville, FL 32605
D	David Barden	900 NW 76th Blvd	Gainesville, FL 32605

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

Becky Bumgarner

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

6793 Newberry Road Suite 101

Suite, Apt. #, Etc.

Suite 101

City

Gainesville

State

FL

Zip Code

32605

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

Becky R. Bumgarner
REGISTERED AGENT MUST SIGN

Date

3/19/97

11. 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.)

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

Kristen Moore
Kristen Moore

Kristen Moore
Kristen Moore

3/19/97
Date

352/331-0040
Daytime Phone #

CR2E040 (12/96)