

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
08 SEP 16 PM 4: 48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000005188

1. Corporation Name

Melbourne/Palm Bay Alumnae Chapter Delta Sigma

800135987868
09/16/08--01040--003 **918.75

REINSTATEMENT 03-08

2. Principal Office Address - No P.O. Box #

805 E. Hopkins Street

Suite, Apt. #, etc.

3. Mailing Office Address

690 Caribbean Road

Suite, Apt. #, etc.

City & State

Melbourne, FL

City & State

Satellite Beach, FL

Zip

32901

Country

Brevard

Zip

32937

Country

Brevard

4. Date Incorporated or Qualified
To Do Business in Florida

10/17/1994

5. FEI Number

59-0245620

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Cynthia Mathis

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

4835 Lake Waterford Way W

Suite, Apt. #, Etc.

City

Melbourne, FL

State

FL

Zip Code

32901

☐ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Cynthia Mathis
REGISTERED AGENT MUST SIGN

Date 9/8/08

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Beatrice Gillespie	690 Caribbean Road	Satellite Beach, FL 32937
VPD	Clara Smith	616 E. Roberts Street	Melbourne, FL 32901
SD	Cynthia Mathis	4835 Lake Waterford Way W	Melbourne, FL 32901
TD	Ralphalette Bartell	3318 James Street	Melbourne, FL 32901
D	Cynthia Cochran	295 Roman Ave NE	Palm Bay, FL 32907
D	Aldyth Vaughan	7944 Timberlake Drive	West Melbourne, FL 32904

10. 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 contained in Chapter 119, 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:

Beatrice Gillespie
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Beatrice Gillespie

9/8/2008

Date

Daytime Phone #

321-777-1643