

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N94000005794

1 Corporation Name **IVORY CLUB INC., AN ORGANIZATION OF AFRICAN PROFESSIONALS**

Principal Place of Business

Tampa, Florida

Mailing Address

P.O. Box 22711  
Tampa, FL 33622

99 NOV -2 AM 9:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

000003039350--8  
-11/09/99--01041--011  
\*\*\*297.50 \*\*\*\*297.50

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

2 New Principal Office Address, If Applicable

3 New Mailing Office Address, If Applicable

4 Date Incorporated or Qualified  
To Do Business in Florida

1992

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3265654

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.	Kofi Glover (D)	15003 Morning Drive	Lutz, FL 33549
V. Pres.	David Mufaro (D)	1503 Storington Avenue	Brandon, FL 33511
Sec.	Remi Ogunsola	7508 Meadow Drive	Tampa, FL 33634
Finan Sec.	O. Geoffrey Okogbaa (D)	5016 Londonberry Drive	Tampa, FL 33647
Soc. Sec.	Tunde Seymour	17960 Hollybrook Drive	Tampa, FL 33647

8. Name and Address of Current Registered Agent

Edward Egun  
9010 Hollyshore Drive  
Lutz, FL 33549

9. Name and Address of New Registered Agent

Name  
**Remi Ogunsola**  
Street Address (P.O. Box Number is Not Acceptable)  
**7508 Meadow Drive**  
Suite, Apt. #, Etc.  
City  
**Tampa**  
State  
**FL**  
Zip Code  
**33634**

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

*Remi Ogunsola*

REGISTERED AGENT MUST SIGN

Date

11. This corporation owes the current year  
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See inside 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

*O. Geoffrey Okogbaa*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug. 10, 1999

Date

(813)974-5949

Daytime Phone #

CR2E081 (12/99)