

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 Nov 3 PM 3:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N95000001823**

1. Corporation Name

**FRIENDS OF RAVINE GARDENS, INC.**

Principal Place of Business

1600 TWIGG STREET  
PALATKA FL 32177

Mailing Address

1600 TWIGG STREET  
PALATKA FL 32177

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

04/17/1995

5. FEI Number

59-3322898

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 3	City / State / Zip 4
FC	DRIGGERS, DOT	PO BOX 72	EAST PALATKA FL 32177
D	HENDRICKS, EDWARD	PO BOX 215	PALATKA FL 32178
D	LEMOND, BETTY	1904 CRILL AVE	PALATKA FL 32177
D	HESTER, JIM	319 TARPON BLVD	PALATKA FL 32177
D	GARRETT, W A	314 RUSTIC ROAD	SATSUMA FL 32189
PCSO	MENGEL, ADAM	2920 SILVER LAKE DRIVE	PALATKA FL 32177

8. Name and Address of Current Registered Agent

DRIGGERS, DOT  
151 EAST DRIVE ROAD  
EAST PALATKA FL 32131

9. Name and Address of New Registered Agent

Name

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

151 East River Road

Suite, Apt. #, Etc.

City

East Palatka

State

FL

Zip Code

32131

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. or 617.0505, F.S.

Signature of  
Registered Agent

*Dot Driggers*  
REGISTERED AGENT MUST SIGN

Date

10/15/03

11. 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:

*Dot Driggers*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/15/03 328-2270

Daytime Phone #

CR2ED40 (7/03)



Jeb Bush  
Governor

# Department of Environmental Protection

Marjory Stoneman Douglas Building  
3900 Commonwealth Boulevard  
Tallahassee, Florida 32399-3000

David B. Struhs  
Secretary

October 30, 2003

Mr. Sean Toner  
Division of Corporations  
Florida Department of State  
409 East Gaines Street  
Tallahassee, Florida 32399

Dear Mr. Toner:

This letter is to certify to you that the Friends of Ravine Gardens, Inc., is a duly authorized citizen support organization which is under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S. Pursuant to F.S. 617.0122, this filing is exempt from any fees when certified by this department.

After filing, please return certified documents to Phillip Werndli at the above address, MS 535. If further information is needed feel free to call him at 245-3098.

Sincerely,

Mike Bullock  
Director  
Florida Park Service

MB/pwf

Attachments