

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
08 AUG 14 AM 11:24
CLERK OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N 95000004906

1. Corporation Name

VIETNAM HELICOPTER PILOTS ASSOCIATION OF
FLORIDA, INC.

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

3602 N. U.S. HWY 301

Suite, Apt. #, etc. _____

City & State

TAMPA, FL

Zip

33619-1247

Country

U.S.A.

3. Mailing Office Address

3602 N. U.S. HWY 301

Suite, Apt. #, etc. _____

City & State

TAMPA, FL

Zip

33619-1247

Country

U.S.A.

700134467637
08/14/08--01038--012 **367.50
REINSTATEMENT 03-08

**4. Date Incorporated or Qualified
To Do Business in Florida**

12/22/1997

5. FEI Number

59-3339607

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

KENNETH S. MULHOLLAND

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

16709 SHEFFIELD PARK DRIVE

Suite, Apt. #, Etc. _____

City

LUTZ

State

FL

Zip Code

33549

☒ 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

Kenneth Mulholland
REGISTERED AGENT MUST SIGN

Date 8/11/2008

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
P PRESIDENT	DONALD M. WELCH	214 EDGEWOOD AVE.	CLEARWATER, FL 33755
VIP VICE PRESIDENT	HOWARD E. SMITH	2111 NORETTA LANE	LAKELAND, FL 33811
C CHAIRMAN	KENNETH S. MULHOLLAND	16709 SHEFFIELD PARK DR.	LUTZ, FL 33549
S	GARY W. HARZELL	1915 W. TALL OAKS DR.	BEVERLY, FL 34465
D	RICHARD C. ANTROSS	2208 CHEROKEE TRAIL	VAL RICO, FL 33594
D	JAMES M. BASTA	4612 CLOVERLAWN DR.	TAMPA, FL 33624

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:

Kenneth Mulholland
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/11/2008
Date

813-949-3359
Daytime Phone #

8/18/08