

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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

DOCUMENT # N96000003089

1. Corporation Name

PUNTA GORDA VOLUNTEER FIRE ASSOCIATION, INC.

Principal Place of Business

1410 TAMiami TRAIL
PUNTA GORDA FL 33950

Mailing Address

1410 TAMiami TRAIL
PUNTA GORDA FL 33950

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

2. New Principal Office Address, If Applicable

1410 Tamiami Trail
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

1410 Tamiami Trail
Suite, Apt. #, etc.

City & State

Punta Gorda FL
Zip 33950 Country U.S.A.

City & State

Punta Gorda FL
Zip 33950 Country USA

REINSTATEMENT 98

4. Date Incorporated or Qualified To Do Business in Florida

06/10/1996

5. FEI Number

65-0748884

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)

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
PD	SANFORD, KERRY <i>DELETE</i>	21279 DAVISON AVE.	PORT CHARLOTTE FL 33954
VPD	WRIGHT, JEFF <i>DELETE</i>	3342 EAST ST.	PORT CHARLOTTE FL 33950
STD	PIETRZAK, GAYLE <i>DELETE</i>	20610 TAPPAN ZEE DR.	PORT CHARLOTTE FL 33952
PRES.D	Jeff Greenwood	25161 Obelisk Ct.	Punta Gorda, FL 33983
V.P.D	Bart Hutchison	20184 Susan Ave.	Port Charlotte, FL 33952
S.T.D	Robert Lewandowski	1450 Kensington St.	Port Charlotte, FL 33952

8. Name and Address of Current Registered Agent

SANFORD, KERRY
1410 TAMiami TRAIL
PUNTA GORDA FL 33950

800002723918-7

12/28/98-01115-011

9. Name and Address of New Registered Agent

Name

Jeff Greenwood

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

25161 Obelisk Ct 1410 Tamiami Tr.

Suite, Apt. #, Etc.

City

Punta Gorda

State

FL

Zip Code

33980

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 12/14/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (9/98)