

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED

97 NOV -5 AM 10:48

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **N96000004121**

1. Corporation Name

HIWAY PARK BLACK BUSINESSMEN ASSOC. INC.

Principal Place of Business

**108 MAIN STREET
 LAKE PLACID FL 33852**

Mailing Address

**108 MAIN STREET
 LAKE PLACID FL 33852**

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

08/07/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0704311

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
Director/President	Moetry Strong	130 CAVER Street	LAKE Placid Fla. 33852
Vice President	D Melvin Hawthorne	108 Main St.	LAKE Placid Fla 33852
Secretary	D Tossal Gilbert	Short St.	LAKE Placid Fla. 33852
Treasurer	Daniel Kemp	113 Florida DRIVE	LAKE Placid Fla 33852

96
11-7-97

8. Name and Address of Current Registered Agent

**STRONG, MOETRY
 108 MAIN STREET
 LAKE PLACID FL 33852**

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

Moetry Strong

REGISTERED AGENT MUST SIGN

Date

OCT. 30, 1997

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Melvin Hawthorne

Date

Daytime Phone

11/3/97-941-4652125

CR2E040 (8/97)

Nov. 3, 1997

(2)

To whom it may concern, I
Mokey Strong, President of the Hawaii
Park Black Businessmen Assoc. Inc. do I
not, at least to my knowledge, receive
all 1997 Corporation Annual Report forms.

I was not aware that we needed
to fill this form out and send it in a
fee of \$61.25.

Sincerely Yours,

Mokey Strong