

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

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

DOCUMENT # N96000005069

1. Corporation Name

KENNEDY SPACE CENTER SUPPORT COMMITTEE INC.

Principal Place of Business

Mailing Address

914 DIXON BLVD  
COCOA FL 32922  
US

914 DIXON BLVD  
COCOA FL 32922  
US

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

10/02/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

516 Delannoy Ave

516 Delannoy Ave

City & State

City & State

Cocoa, FL

Cocoa, FL

Zip

Country

Zip

Country

32922

USA

32922

USA

5. FEI Number

NOT APPLICABLE

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
CD	ADAMEK, ED	USK-383, 8550 ASTRONAUT BLVD.	CAPE CANAVERAL FL 32920
D	SHYE, ANDRE JACK	412 WESTCHESTER DRIVE	COCOA FL
TD	KINNEY, FRANK	6750 SOUTH HIGHWAY US 1	TITUSVILLE FL 32780
SD	MOYER, JERRY	BIONETICS, MC BIO-3	KENNEDY SPACE FL 32899
ASD	SCARINGE, ROBERT	200 YELLOW PLACE	ROCKLEDGE FL 32955
			LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RUNYAN, GARY G  
3960 S. BANANA RIVER BLVD  
COCOA BEACH FL 32931

Name

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

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.

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\*\*\*\*\*61.25 \*\*\*\*\*61.25

Signature of  
Registered Agent

SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date 10-22-01

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

17 Oct 01 321.269.6330

Date

Daytime Phone #

CR2040 (8/01)

208

**KENNEDY SPACE CENTER SUPPORT COMMITTEE**

*A nonpartisan committee of aerospace and community leaders working together to  
build support for issues and opportunities facing NASA/KSC*

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15 October 2001

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

Please execute this Application For Reinstatement for the Kennedy Space Center Support Committee. Our address has changed and we only now received the notice that our not for profit corporation had been dissolved. I just came on board as the Executive Director as of August 20, 2001. A check for \$61.25 is enclosed. Please advise me if anything further is required.

Thank you,



Nikki Walker  
Executive Director  
Kennedy Space Center Support Committee