

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 # N97000000979**

1. Corporation Name

**MANATEE MILLENNIUM JUBILEE, INC.**

Principal Place of Business

6351 MANATEE AVE W  
BRADENTON FL 34209

Mailing Address

6351 MANATEE AVE W  
BRADENTON FL 34209

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**REINSTATEMENT**

4. Date Incorporated or Qualified To Do Business in Florida

02/18/1997

**SP**

5. FEI Number

65-0777276

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
Pres.	Carol L. Hawkinson	1125 Edgewater Circle	Bradenton, Florida 34209
VP	John E. Lawler	425-19th St. Ct. Circle W	Bradenton, Florida 34205
Secty	Edward J. Lindsey	5725-39th St. Circle E.	Bradenton, Florida 34203
Treas.	William L. Holt	3914 Riverview Blvd. W.	Bradenton, Florida 34209
			700002956627--3
			-08/11/99--01026--001
			****297.50 ****297.50

8. Name and Address of Current Registered Agent

HOLT, WILLIAM L  
6351 MANATEE AVE W  
BRADENTON FL 34209

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

REGISTERED AGENT MUST SIGN

Date July 8, 1999

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:

William L. Holt

July 8, 1999

1-800-344-6889X205

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2040 (9/98)