

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 # N97000001263

1. Corporation Name

COALITION FOR RATIONAL CONSTRUCTION REGULATION,  
INC.

Principal Place of Business

6710 SW 80TH STREET  
SUITE 101  
MIAMI FL

Mailing Address

6710 SW 80TH STREET  
SUITE 101  
MIAMI FL

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

03/05/1997

5. FEI Number

65-0768430

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

REINSTATEMENT

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	WYNNEMER, MARK	5879 SUNSET DR, STE 2	MIAMI FL 33143
VD	COOKE-YARBOROUGH, CHRISTOPHER	6802 SW 64TH AVE	SOUTH MIAMI FL 33143
SD	BROWN, BILL	9300 SW 68TH AVE	MIAMI FL 33156
TD	DEMANDT, FRANK	6710 SW 80TH ST, STE 101	MIAMI FL
D	BROWN, BOB	6710 SW 80TH ST, STE 101	MIAMI FL
D	DOWNEY, JACK	8715 SW 129TH TERRACE	MIAMI FL 33176

8. Name and Address of Current Registered Agent

GOLDMAN, GARY B  
20700 W DIXIE HWY  
SUITE 100  
NORTH MIAMI BEACH FL 33180

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

700002735497-9

01/08/99-01114-001

\*\*\*236.25 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

*Frank Demandt*  
**REQUIRED**  
REGISTERED AGENT MUST SIGN

Date

12/9/98

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANK DEMANDT

11-18-98

Date

305-662-1940

Daytime Phone #